R-101

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

MARGIN RESERVED FOR BINDING

1919

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE. City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. 1 Intention No. .....

GROOM		BRIDE	
3 FULL NAME	Charles F. McNeil	13 FULL NAME (If a widow or divorced, give also maiden name)	Mary L. O'Donnell
4 AGE AT LAST BIRTHDAY (Years)	23	14 AGE AT LAST BIRTHDAY (Years)	26
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Westborough Mass 6 Myrtle St.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	Single
9 OCCUPATION	R.R. freight Clerk	19 OCCUPATION	Floor Lady
10 BIRTHPLACE (City or town) (State or country)	Westborough Mass.	20 BIRTHPLACE (City or town) (State or country)	Southborough Mass.
11 NAME OF FATHER	Joseph McNeil	21 NAME OF FATHER	William O'Donnell
12 MAIDEN NAME OF MOTHER	Hannah McGilvary	22 MAIDEN NAME OF MOTHER	Margaret Halley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 20th day of January 1919

Certificate issued January (Month) 25 (Day) 1919 (Year) by Charles H Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on January (Month) 27 (Day) 1919 (Year)

Name P.H. Beaudet Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ....., St., City or town of Southborough Mass

25 Certificate received by city or town clerk Jan (Month) 28 (Day) 1919 (Year) Chas H Newton Town Clerk CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage Feb 22 1919 (Month) (Day) (Year) — Registered No. 2 — Intention No.

GROOM	BRIDE
3 FULL NAME: Francis D. Newton	13 FULL NAME: Margaret L. Madan (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 70 (Years)	14 AGE AT LAST BIRTHDAY: 47 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 3rd	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd
8 SINGLE, WIDOWED, OR DIVORCED: Widower	18 SINGLE, WIDOWED, OR DIVORCED: Divorced Now Widowed
9 OCCUPATION: Deputy Sheriff	19 OCCUPATION: Housekeeper
10 BIRTHPLACE: Southborough (City or town) Mass (State or country)	20 BIRTHPLACE: Antigonish (City or town) Nova Scotia (State or country)
11 NAME OF FATHER: Dexter Newton	21 NAME OF FATHER: Hugh MacGillivary
12 MAIDEN NAME OF MOTHER: Arathusa A. Brigham	22 MAIDEN NAME OF MOTHER: Christie MacDonald

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this eleventh day of February 1919.

Certificate issued February (Month) 17 (Day) 1919 (Year) by Charles H Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns Rectory St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward South boro Mass (Name of city or town) on Feb. 22nd 1919 (Month) (Day) (Year)

Name Rev. J. H. Boland Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. , St., City or town of Southboro Mass

25 Certificate received by city or town clerk Mar (Month) 10 (Day) 1919 (Year) Charles H Newton CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. 3 — Intention No. ____

GROOM		BRIDE	
3 FULL NAME	Peter H. Hines	13 FULL NAME (If a widow or divorced, give also maiden name)	Sadie Trimble
4 AGE AT LAST BIRTHDAY (Years)	21	14 AGE AT LAST BIRTHDAY (Years)	27
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Marlboro Northboro Rd
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Chauffeur	19 OCCUPATION	At home
10 BIRTHPLACE (City or town) (State or country)	Ireland	20 BIRTHPLACE (City or town) (State or country)	Boylston Mass
11 NAME OF FATHER	James Hines	21 NAME OF FATHER	Harry Trimble
12 MAIDEN NAME OF MOTHER	Mary Cussick	22 MAIDEN NAME OF MOTHER	Annie Moore

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or Town) of Southborough (Name of city or town) according to law, this 6th day of March 1919

Certificate issued March (Month) 15 (Day) 1919 (Year) by Chas. H. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Anns Rectory St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) on the 17th March (Month) (Day) 1919 (Year)

Name Rev. P. J. Boland Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Southboro Mass, City or town of ____

25 Certificate received by city or town clerk May (Month) 20 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage: June (Month) 6 (Day) 1919 (Year)

Registered No. 5

Intention No.

GROOM		BRIDE	
3 FULL NAME	Joseph Delardo	13 FULL NAME (If a widow or divorced, give also maiden name)	Mary Rossi
4 AGE AT LAST BIRTHDAY (Years)		14 AGE AT LAST BIRTHDAY (Years)	
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	Single	18 SINGLE, WIDOWED, OR DIVORCED	Single
9 OCCUPATION	Shoemaker	19 OCCUPATION	At home
10 BIRTHPLACE (City or town)	Italy (State or country)	20 BIRTHPLACE (City or town)	Italy (State or country)
11 NAME OF FATHER	Charles Delardo	21 NAME OF FATHER	Petey Rossi
12 MAIDEN NAME OF MOTHER	Louisa Boscoli	22 MAIDEN NAME OF MOTHER	Angeline Malcedi

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 20 day of May 1919.

Certificate issued May (Month) 26 (Day) 1919 (Year) by Charles H Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Southboro (Name of city or town) on June (Month) 3 (Day) 1919 (Year)

Name Rev P H Boland Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St Anns Rectory St., City or town of Southboro

25 Certificate received by city or town clerk June (Month) 6 (Day) 1919 (Year) Charles H Newton CITY OR TOWN CLERK OR REGISTRAR Town Clerk

ORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage: June (Month) 3 (Day) 1919 (Year) — Registered No. 4 — Intention No.

GROOM	BRIDE
3 FULL NAME: Louis Nobarrini	13 FULL NAME: Premina Trioli (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 32 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Machinist	19 OCCUPATION: at home
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: Southborough, Mass. (City or town) (State or country)
11 NAME OF FATHER: [Father and Mother Name Cannot be Learned reason given (Orphan)]	21 NAME OF FATHER: John Trioli
12 MAIDEN NAME OF MOTHER:	22 MAIDEN NAME OF MOTHER: Clemetina Cordani

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 20th day of May 1919

Certificate issued May (Month) 26 (Day) 1919 (Year) by Chas. H. Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward (Name of city or town) Southboro on June (Month) 3 (Day) 1919 (Year)

Name P. H. Boland Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St Anns Rectory St., City or town of Southboro

25 Certificate received by city or town clerk June (Month) 3 (Day) 1919 (Year) Charles H. Newton CITY OR TOWN CLERK OR REGISTRAR Town Clerk

FORM R-103

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

11-18. 5,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE City or town Southborough — Registered No. 6

2 DATE OF MARRIAGE June 8 1919 (Month) (Day) (Year) — Return of city or town of Southborough

GROOM	BRIDE
3 FULL NAME Harold Lavin Jennison	13 FULL NAME Florence Mercedes Cheetham (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 28 (Years)	14 AGE AT LAST BIRTHDAY 27 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass Upland Road	16 RESIDENCE AT TIME OF MARRIAGE Providence R.I. 563 Public St
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first
8 SINGLE, WIDOWED, OR DIVORCED single	18 SINGLE, WIDOWED OR DIVORCED single
9 OCCUPATION Chauffeur	19 OCCUPATION School Teacher
10 BIRTHPLACE Southborough Mass (City or town) (State or country)	20 BIRTHPLACE Wappingers N.Y. State (City or town) (State or country)
11 NAME OF FATHER Charles W. Jennison	21 NAME OF FATHER John F. Cheetham
12 MAIDEN NAME OF MOTHER Mary Louise Lavin	22 MAIDEN NAME OF MOTHER Eva Sidley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ~~city~~ (or town) of Southborough Mass. according to law, this third day of June 1919

Certificate issued June 8 1919 by Charles H Newton REGISTRAR

24 To the Town (City or town) Clerk of Southborough, Mass.

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued June 8 1919 (Month) (Day) (Year)

by Charles H. Newton (Name of clerk) Clerk of the city (or town) of Southborough Massachusetts, and that the persons named therein were joined in marriage by me, at No. Upland Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward in the ~~city~~ (or town) of Southborough on June 8th 1919

Name James H. Reardon Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., ~~City~~ or town of Southborough Mass.

25 Received by city or town clerk 19

REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Fall River (Do not enter name of village or section of city or town)

2 Date of Marriage: June (Month) 16 (Day) 1919 (Year) — Registered No. 7 — Intention No.

GROOM	BRIDE
3 FULL NAME: Leonard John Stevenson	13 FULL NAME: Mary Josephine Pearson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 33 (Years)	14 AGE AT LAST BIRTHDAY: 28 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass Maple St.	16 RESIDENCE AT TIME OF MARRIAGE: Fall River, Mass 36 Taylor St.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Station Agt. N.Y.N.H.&H.R.R.	19 OCCUPATION: Book-keeper
10 BIRTHPLACE: Framingham, Mass (City or town) (State or country)	20 BIRTHPLACE: Fall River, Mass (City or town) (State or country)
11 NAME OF FATHER: John L. Stevenson	21 NAME OF FATHER: James Henry Pearson
12 MAIDEN NAME OF MOTHER: Anna L. Walsh	22 MAIDEN NAME OF MOTHER: Charlotte Jennie Greggs

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough Mass (Name of city or town) according to law, this second day of June 1919

Certificate issued June (Month) 9 (Day) 1919 (Year) by Charles H. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 291 Maple St., (If marriage was solemnized in a church, give its NAME instead of street and number)

8 Ward Fall River (Name of city or town) on June (Month) 16 (Day) 1919 (Year)

Name J. Wallace Chadwick Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 291 Maple St., City or town of Fall River, Mass.

25 Certificate received by city or town clerk June (Month) 17 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 8

Intention No. .....

GROOM		BRIDE	
3 FULL NAME	Thomas Burns	13 FULL NAME (If a widow or divorced, give also maiden name)	Thelma Moncie Lambert (Gould)
4 AGE AT LAST BIRTHDAY (Years)	32	14 AGE AT LAST BIRTHDAY (Years)	20
5 COLOR	White	15 COLOR	W.
6 RESIDENCE AT TIME OF MARRIAGE	Southborough Newton St	16 RESIDENCE AT TIME OF MARRIAGE	Marlborough 371 Lincoln St.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	2nd
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	Wid.
9 OCCUPATION	Ships Carpenter	19 OCCUPATION	Shoe operative
10 BIRTHPLACE (City or town) (State or country)	Brooklyn N.Y.	20 BIRTHPLACE (City or town) (State or country)	Natick, Mass.
11 NAME OF FATHER	Thomas Henry Burns	21 NAME OF FATHER	William Gould
12 MAIDEN NAME OF MOTHER	Mary Lynch	22 MAIDEN NAME OF MOTHER	Jessie Francis Durling

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town)
of Southborough (Name of city or town) according to law, this 14th day of June 1919.
Certificate issued June (Month) 19 (Day) 1919 (Year) by Charles F. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward ..... (Name of city or town) on ..... (Month) (Day) (Year)
Name ..... Official station .....
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. ..... St., City or town of .....

Returned June 19 1919
Charles F. Newton
June 20 1919

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)
CITY OR TOWN CLERK OR REGISTRAR

FORM H.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE.

This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. (See law on back of this blank.)

No. .....

(FILL OUT WITH INK. ALL NAMES TO BE IN FULL.)

ILLEGAL ALTERATIONS OR ERASURES ARE PROHIBITED.

9.

Groom.

Name, Harold F. Whiting

Age, 21 Color, White

Residence, 316 Central St. Gardner

Occupation, Machinist

What marriage, 1st (1st, 2d, 3d, etc.)

If a widower or divorced, Single

Birthplace, Fitchburg, Mass.

Name of father, Elmer H.

Maiden name of mother, Selina Abar

Bride.

Name, Hazel F. Knowlton (If a widow or divorced, maiden name also to be given.)

Age, 20 Color, White

Residence, 51 Richmond St. Gardner

Occupation, Stenographer

What marriage, 1st (1st, 2d, 3d, etc.)

If a widow or divorced, Single

Birthplace, Gardner, Mass.

Name of father, Alec E.

Maiden name of mother, Gertrude W. Read

The intention of marriage by the parties above-named was duly entered by me in the records of the Town of Gardner according to law, this Seventh day of July 1919.

(Signed) Isabel G. McDowell, Asst. Clerk.

Certificate issued July 12, 1919.

Certificate of Marriage.

To the Town *Clerk of* Southborough, Mass.
[City or Town.]

I hereby certify, that the foregoing is a true copy of the Certificate of Intention of Marriage issued July 12, 1919, by Isabel G. McDowell, Asst. Clerk of Gardner, Massachusetts, and that the parties named therein were joined in marriage by me, at Southborough this 19th day of July 1919.

Signature: Robert F. Chaney

Residence, Southborough

Official Station, Vicar of St. Mark's Church

ALL DATES AND SIGNATURES TO BE INCLUDED.

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year) — Registered No. 10 — Intention No.

GROOM		BRIDE	
3 FULL NAME	Charles C. Restelli	13 FULL NAME (If a widow or divorced, give also maiden name)	Ida Aspesi
4 AGE AT LAST BIRTHDAY (Years)	24	14 AGE AT LAST BIRTHDAY (Years)	21
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Milford, Mass. 30 Woodland Ave.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough, Mass. Pleasant St
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Machinest	19 OCCUPATION	Stenographer
10 BIRTHPLACE (City or town) (State or country)	Quincy, Mass.	20 BIRTHPLACE (City or town) (State or country)	Southborough, Mass.
11 NAME OF FATHER	Cesar Restelli	21 NAME OF FATHER	Joseph Aspesi
12 MAIDEN NAME OF MOTHER	Josephine Villa	22 MAIDEN NAME OF MOTHER	Maria Scampini

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of July 1919.

Certificate issued July (Month) 28 (Day) 1919 (Year) by Charles H. Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Southboro (Name of city or town) on August (Month) 4 (Day) 1919 (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk Aug (Month) 13 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

Groom. Israel Noel Berthiaume

Bride. Dolores Berthiaume

Residence of Groom. Southboro, Mass

" Bride. 90 Fourth St

Age of Groom. 28

" Bride. 23

Color of Groom. W

" Bride. W

Occupation of Groom. Laborer

" Bride. Weaver

Birthplace of Groom. Spencer, Mass

" Bride. ~~MXIX~~ Marlboro, Mass

No. of Marriage of Groom. 1st

" Bride. 2nd

Groom Widowed or Divorced.

Bride " " " Wid

Intention Filed. Aug. 15, 1919

By whom Married *Rev. Elphege L. Bussier

Residence. Manchester N.H.

Official Station. Catholic Clergyman

Date of Marriage. Sept. 1, 1919

Place. Manchester, N.H.

[Record continued over.]

*Clergyman or Justice of the Peace

2498

Nov. 14 Rec'd C.H.M.

[Record continued.]

GROOM'S FATHER AND MOTHER.

Father's Name ... Joseph

" Residence ... Dead

" Age* ... 52 ... Color ... W

" Occupation ... Millop'r.

" Birthplace ... Oxford, Mass

Mother's Name ... Emma Archambeault

" Residence ... Spencer, Mass

" Age* ... 50 ... Color ... W

" Occupation ... Housewife

" Birthplace ... Canada

BRIDE'S FATHER AND MOTHER.

Father's Name ... Alphonse Blais

" Residence ... Manchester, N.H.

" Age* ... 58 ... Color ... W

" Occupation ... Laster-Factory

" Birthplace ... Canada

Mother's Name ... Ernestine Paquette

" Residence ... Manchester

" Age* ... 54 ... Color ... W

" Occupation ... Housewife

" Birthplace ... Canada

THE STATE OF NEW HAMPSHIRE.

I hereby certify that the above marriage record is correct to the best of my knowledge and belief.

William J. O'Brien

Clerk of Manchester, N.H.

Date Nov. 7, 1919

*If deceased, give age at death.

FORM R-102

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. NO CERTIFICATE WITH ERASURES OR ALTERATIONS WILL BE ACCEPTED.

11-18. 30,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 **Place of Marriage** ..... Y

This form is to be used by clerks of cities and towns for making a return to the Secretary of the Commonwealth of a marriage of a resident of his city or town which was solemnized elsewhere.

Registered No. 12

2 **Date of Marriage** ..... (Month) (Day) (Year) Return of city or town of .....

GROOM		BRIDE	
3 FULL NAME	Israel Noel Berthiaume	13 FULL NAME (If a widow or divorced, give also maiden name)	Dolores Berthiaume (Blais)
4 AGE AT LAST BIRTHDAY (Years)	28	14 AGE AT LAST BIRTHDAY (Years)	23
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE (City or town) (State or country)	Southbro Mass	16 RESIDENCE AT TIME OF MARRIAGE (City or town) (State or country)	Manchester, N.H. N.H.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	2nd
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	wid.
9 OCCUPATION	Laborer	19 OCCUPATION	Weaver
10 BIRTHPLACE (City or town) (State or country)	Spencer Mass.	20 BIRTHPLACE (City or town) (State or country)	Marlboro, Mass.
11 NAME OF FATHER	Joseph Berthiaume	21 NAME OF FATHER	Alphonse Blais
12 MAIDEN NAME OF MOTHER	Emma Archambeault	22 MAIDEN NAME OF MOTHER	Ernestine Paquette

23 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Manchester on Sept 1, 1919
(Name of city or town) (Month) (Day) (Year)

Name Elphege J Bussiere Official station Catholic Clergyman
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ..... St., City or town of Manchester

24 Certificate received by registrar Nov 14 1919
(Month) (Day) (Year)

C. H. N. REGISTRAR

Southbro (City or town)

ORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage Sept. 1, 1919 (Month) (Day) (Year) Registered No. 11.

Intention No.

GROOM	BRIDE
3 FULL NAME Francis Joseph Mattioli	13 FULL NAME Angeline Beatrice Bagley (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 28 (Years)	14 AGE AT LAST BIRTHDAY 28 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE 192 Piquette Ave. Detroit, Mich	16 RESIDENCE AT TIME OF MARRIAGE East Main St. Southborough, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First
8 SINGLE, WIDOWED, OR DIVORCED single	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Purchasing Agt.	19 OCCUPATION Registered Nurse
10 BIRTHPLACE Southborough, Mass. (City or town) (State or country)	20 BIRTHPLACE Southborough Mass. (City or town) (State or country)
11 NAME OF FATHER Ericole Mattioli	21 NAME OF FATHER Dennis Francis Bagley
12 MAIDEN NAME OF MOTHER Roseann Ferguson	22 MAIDEN NAME OF MOTHER Mary Elizabeth Caine

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 26th day of Aug., 1919

Certificate issued Aug. 31, 1919 (Month) (Day) (Year) by Charles F. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Boston Road St. Anne's Church St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southboro on September 1st, 1919 (Name of city or town) (Month) (Day) (Year)

Name James P. Curran Official station Priest. (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road. St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk September 2 1919 Charles F. Newton (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE Boston

City or Town ~~Southborough~~ (Do not enter name of village or section of city or town)

2 Date of Marriage Sept 15 1919 (Month) (Day) (Year) Registered No. 13.

Intention No.

GROOM		BRIDE	
3 FULL NAME	Chester Warren Wheeler	13 FULL NAME (If a widow or divorced, give also maiden name)	Elsie May Stewart
4 AGE AT LAST BIRTHDAY (Years)	25	14 AGE AT LAST BIRTHDAY (Years)	22
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Waltham 2 Lyman St.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	First
8 SINGLE, WIDOWED, OR DIVORCED	Single	18 SINGLE, WIDOWED, OR DIVORCED	Single
9 OCCUPATION	Clerk	19 OCCUPATION	Railway Mail Clerk
10 BIRTHPLACE (City or town) (State or country)	Southborough, Mass.	20 BIRTHPLACE (City or town) (State or country)	Milton, Mass.
11 NAME OF FATHER	Horace E. Wheeler	21 NAME OF FATHER	George F. Stewart
12 MAIDEN NAME OF MOTHER	Clara M. Newton	22 MAIDEN NAME OF MOTHER	Christina Kennedy

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 28th day of August 19 19.

Certificate issued Sept 2 1919 (Month) (Day) (Year) by Charles F. Newton (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at ~~No.~~ St. Paul Cathedral ~~St.~~ (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward (Name of city or town) Boston on (Month) September (Day) 15 (Year) 1919

Name Henry Goddard Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 537 Mass. Ave St., City or town of Boston, Mass.

25 Certificate received by city or town clerk Sept (Month) 16 (Day) 1919 (Year) Chas F. Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Newton (Do not enter name of village or section of city or town)

2 Date of Marriage: Sept. 24, 1919 (Month) (Day) (Year) — Registered No. 14 — Intention No.

GROOM		BRIDE	
3 FULL NAME	Charles Philip Harding Jr.	13 FULL NAME (If a widow or divorced, give also maiden name)	Revena Ethel De Moue
4 AGE AT LAST BIRTHDAY (Years)	21	14 AGE AT LAST BIRTHDAY (Years)	19
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough Winter St.	16 RESIDENCE AT TIME OF MARRIAGE	West Newton
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	Single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Ice Dealer	19 OCCUPATION	Stenographer
10 BIRTHPLACE (City or town) (State or country)	Brighton Mass.	20 BIRTHPLACE (City or town) (State or country)	West Newton Mass.
11 NAME OF FATHER	Charles Philip Harding	21 NAME OF FATHER	James A. De Moue
12 MAIDEN NAME OF MOTHER	Ella Gertrude Disc	22 MAIDEN NAME OF MOTHER	Jennie Walker

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 15th day of Sept. 1919.

Certificate issued Sept. 20 1919 (Month) (Day) (Year) by Chas. H. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 152 Webster St. (If marriage was solemnized in a church, give its NAME instead of street and number) St.,

Ward Newton (Name of city or town) on September (Month) 24 (Day) 1919 (Year)

Name Thomas S. Roy Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 40 Lincoln Pk, City or town of Newton.

25 Certificate received by city or town clerk Sept. (Month) 26 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. 15 — Intention No. ____

GROOM	BRIDE
3 FULL NAME: Michael J. McCarthy	13 FULL NAME: Angelie Deaufault (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 29 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough White Bagley Rd	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough, Mass. Fayette St
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Carpenter	19 OCCUPATION: Shoe Operative
10 BIRTHPLACE: Southborough, Mass. (City or town) (State or country)	20 BIRTHPLACE: Marlborough, Mass (City or town) (State or country)
11 NAME OF FATHER: James McCarthy	21 NAME OF FATHER: Elsiar Deaufault
12 MAIDEN NAME OF MOTHER: Margaret Colleary	22 MAIDEN NAME OF MOTHER: Louise Lawrence

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 12th day of Oct. 1919

Certificate issued Oct (Month) 15th (Day) 1919 (Year) by Charles H Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mary's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) Marlborough, Mass on Oct. (Month) 19 (Day) 1919 (Year)

Name L-P. Tanguay Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 26 Broad St St., City or town of Marlborough, Mass.

25 Certificate received by city or town clerk Oct (Month) 24 (Day) 1919 (Year) Chas H Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year)

Registered No. 16.

Intention No. _____

GROOM		BRIDE	
3 FULL NAME: Charles Edward Brown		13 FULL NAME: Hazel Curtis O'Leary (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 21 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 19 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Natick, Mass 15 No Main St.		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Central St.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	8 SINGLE, WIDOWED, OR DIVORCED: Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Shipper		19 OCCUPATION: Box Maker	
10 BIRTHPLACE: Natick, Mass. (City or town) (State or country)		20 BIRTHPLACE: Southborough, Mass. (City or town) (State or country)	
11 NAME OF FATHER: George W. Brown		21 NAME OF FATHER: Harry C. O'Leary	
12 MAIDEN NAME OF MOTHER: Lulu Howe Bacon		22 MAIDEN NAME OF MOTHER: Hettie L. Eustis	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 26 day of Oct, 1919.

Certificate issued Oct 31 1919 (Month) (Day) (Year) by Charles H. Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 50 Washington St. (If marriage was solemnized in a church, give its NAME instead of street and number)

I Ward Natick (Name of city or town) on Nov. (Month) 2, (Day) 1919 (Year)

Name Rev. Arthur W. Clifford Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 50 Washington St., City or town of Natick.

25 Certificate received by city or town clerk Nov (Month) 8 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — *This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.*

City or Town 14 Laurence Road, Newton (Do not enter name of village or section of city or town) 2 Date of Marriage November 4 1919 (Month) (Day) (Year) Registered No. 17

Intention No.

GROOM		BRIDE	
3 FULL NAME Robert M. Burnett		13 FULL NAME Helen L. Haynes (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 66 (Years)	5 COLOR White	14 AGE AT LAST BIRTHDAY 39 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass.		16 RESIDENCE AT TIME OF MARRIAGE Boston, Mass 509 Audubon St	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) Second	8 SINGLE, WIDOWED, OR DIVORCED Widowed	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Farmer		19 OCCUPATION Secretary	
10 BIRTHPLACE Boston (City or town)	Mass. (State or country)	20 BIRTHPLACE Framingham (City or town)	Mass (State or country)
11 NAME OF FATHER Joseph Burnett		21 NAME OF FATHER Daniel W. Haynes	
12 MAIDEN NAME OF MOTHER Josephine Cuttey		22 MAIDEN NAME OF MOTHER Charlotte Farley	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 23rd day of October 1919.

Certificate issued October (Month) 28 (Day) 1919 (Year) by Charles H. Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 14 Laurence Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Newton (Name of city or town) on November (Month) 4 (Day) 1919 (Year)

Name Warren G. Traver Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Th. Norris School St., City or town of Southborough

25 Certificate received by city or town clerk Nov (Month) 10 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year)

Registered No. 16

Intention No. ____

GROOM	BRIDE
3 FULL NAME: Royal Cheney	13 FULL NAME: Mary Jane Pearson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 80 (Years)	14 AGE AT LAST BIRTHDAY: 67 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Fitchburg Mass 44 Prichard St.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): fourth	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): second
8 SINGLE, WIDOWED, OR DIVORCED: Widowed	18 SINGLE, WIDOWED, OR DIVORCED: Widowed
9 OCCUPATION: Retired	19 OCCUPATION: Cook
10 BIRTHPLACE: Derby (City or town) Vermont (State or country)	20 BIRTHPLACE: Deerfield (City or town) Mass. (State or country)
11 NAME OF FATHER: Moody Cheney	21 NAME OF FATHER: John R. Moore
12 MAIDEN NAME OF MOTHER: Alice Whitney	22 MAIDEN NAME OF MOTHER: Hannah Gardner

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ~~City~~ town of ____ (Name of city or town) according to law, this 12th day of November 1919.

Certificate issued November (Month) 17 (Day) 1919 (Year) by Chas. H. Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 17 Myrtle Ave (If marriage was solemnized in a church, give its NAME instead of street and number)

5 Ward Fitchburg (Name of city or town) on November 18, 1919. (Month) (Day) (Year)

Name Samuel F. Pingree Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Fitchburg, Mass. ~~St., City or town of~~

25 Certificate received by city or town clerk Nov 20 (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. 19 — Intention No. ____

GROOM	BRIDE
3 FULL NAME: William F. Sullivan	13 FULL NAME: Agnes Telfer (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 29 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough White Bagley Rd	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Chauffeur	19 OCCUPATION: At home
10 BIRTHPLACE: Southborough (City or town) Mass. (State or country)	20 BIRTHPLACE: Scotland (City or town) (State or country)
11 NAME OF FATHER: John F. Sullivan	21 NAME OF FATHER: James J. Telfer
12 MAIDEN NAME OF MOTHER: Julia Murphy	22 MAIDEN NAME OF MOTHER: Eleanor Turnbull

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 4th day of November 1919.

Certificate issued Nov 16 (Month) (Day) 1919 (Year) by Chas H Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ____ (Name of city or town) Southboro, Mass on November 18, 1919 (Month) (Day) (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk Nov 26 (Month) (Day) 1919 (Year) Chas H Newton CITY OR TOWN CLERK OR REGISTRAR

ORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 2 4

Intention No. .....

GROOM	BRIDE
3 FULL NAME: William H. Outhauck	13 FULL NAME: Margaret Eleanor Thompson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 29 (Years)	14 AGE AT LAST BIRTHDAY: 28 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Fall River
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Farmer	19 OCCUPATION: Teacher
10 BIRTHPLACE: Southboro (City or town) Mass. (State or country)	20 BIRTHPLACE: Fall River (City or town) Mass (State or country)
11 NAME OF FATHER: William F. Outhauck	21 NAME OF FATHER: Edward F. Thompson
12 MAIDEN NAME OF MOTHER: Emily Dowdeich	22 MAIDEN NAME OF MOTHER: Caroline Munro

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 20th day of November 1919.

Certificate issued November 25 1919 (Month) (Day) (Year) by Chas H Newton Jr clerk (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 431 Prospect St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Nov. (Month) 27 (Day), 1919 (Year)

Name T. S. Devitt Official station Minister Central Church (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 338 Locust St., City or town of Fall River

25 Certificate received by city or town clerk Nov (Month) 29 (Day) 1919 (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town)

2 Date of Marriage: (Month) (Day) (Year)

Registered No. 21.

Intention No.

GROOM		BRIDE	
3 FULL NAME: Charles A. Flemming		13 FULL NAME: Helen K. Flanders (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 21 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass. Cor Turnpike & Oak Hill Rd		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass Cor Turnpike & Oak Hill Rd	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Clerk (Accountant)		19 OCCUPATION: Stenographer	
10 BIRTHPLACE: Chelsea (City or town)	Mass. (State or country)	20 BIRTHPLACE: Newport (City or town)	N.H. (State or country)
11 NAME OF FATHER: Alexander D. Flemming		21 NAME OF FATHER: Henry H. Flanders	
12 MAIDEN NAME OF MOTHER: Flora Carmichael		22 MAIDEN NAME OF MOTHER: Helen A. Gilfillan	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 18th day of Dec, 1919

Certificate issued Dec (Month) 24th (Day) 1919 (Year) by Charles H. Newton (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Cor Turnpike & Oak Hill Rd (If marriage was solemnized in a church, give its NAME instead of street and number) Fayville Ward Southborough (Name of city or town) on Dec (Month) 27 (Day) 1919 (Year)

Name Asa M Parker Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 29 Clarendon St., City or town of Malden, Mass

25 Certificate received by city or town clerk Dec (Month) 29 (Day) 1919 (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage Jan. 24. 1920 (Month) (Day) (Year) Registered No. 1 Intention No.

GROOM		BRIDE	
3 FULL NAME	James Dallas Corbiere	13 FULL NAME (If a widow or divorced, give also maiden name)	Elizabeth Louise Barber
4 AGE AT LAST BIRTHDAY (Years)	32	14 AGE AT LAST BIRTHDAY (Years)	22
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough Mass.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough. Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Executive	19 OCCUPATION	—
10 BIRTHPLACE (City or town) (State or country)	Morristown N. J.	20 BIRTHPLACE (City or town) (State or country)	Southborough Mass.
11 NAME OF FATHER	James K. Corbiere	21 NAME OF FATHER	William Wyatt Barber
12 MAIDEN NAME OF MOTHER	Emily Georgia Lowell	22 MAIDEN NAME OF MOTHER	Florence Harmon

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 15th day of January 1920.

Certificate issued January 20 1920 (Month) (Day) (Year) by Charles H. Newton Town Clerk (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mark's School Chapel St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward (Name of city or town) Southborough on January 24 1920 (Month) (Day) (Year).

Name Rev. Francis G. Thayer Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Mark's School St., City or town of Southborough Mass.

25 Certificate received by city or town clerk Jan 27 1920 (Month) (Day) (Year) Chas H. Newton CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town)

2 Date of Marriage: (Month) (Day) (Year) — Registered No. 2 — Intention No.

GROOM		BRIDE	
3 FULL NAME	Preston Brown Stewart	13 FULL NAME (If a widow or divorced, give also maiden name)	Cynthia Marion Clough
4 AGE AT LAST BIRTHDAY (Years)	24	14 AGE AT LAST BIRTHDAY (Years)	23
5 COLOR	W	15 COLOR	W
6 RESIDENCE AT TIME OF MARRIAGE	Hopkinton Main St.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough (Fayville)
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Wood Worker	19 OCCUPATION	At home
10 BIRTHPLACE (City or town) (State or country)	Hopkinton Mass.	20 BIRTHPLACE (City or town) (State or country)	Dorchester Mass
11 NAME OF FATHER	James Davis Stewart	21 NAME OF FATHER	Arthur Lathan Clough
12 MAIDEN NAME OF MOTHER	Dora Brown	22 MAIDEN NAME OF MOTHER	Sarah Elizabeth Sconlay

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 15th day of Feb 1920

Certificate issued Feb (Month) 20 (Day) 1920 (Year) by Charles H Newton (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward of Hopkinton (Name of city or town) on February 26th 1920 (Month) (Day) (Year)

Name James A King Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Church St., St., City or town of Hopkinton Mass

25 Certificate received by city or town clerk Feb 28 (Month) 1920 (Day) (Year) Chas. H. Newton CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 3

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Charles Arthur Le Gay	13 FULL NAME: Florence M Thompson Florence Myrtle Lincoln (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 41 (Years)	14 AGE AT LAST BIRTHDAY: 32 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough. Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass
7 NUMBER OF MARRIAGE: 2nd (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE: 2nd (1st, 2d, 3d, etc.)
8 SINGLE, WIDOWED, OR DIVORCED: Widower	18 SINGLE, WIDOWED, OR DIVORCED: Divorced
9 OCCUPATION: Carpenter	19 OCCUPATION: Employee in Hat Factory
10 BIRTHPLACE: Nova Scotia (City or town) (State or country)	20 BIRTHPLACE: Ashland. Mass (City or town) (State or country)
11 NAME OF FATHER: Michael Le Gay	21 NAME OF FATHER: Paul S Lincoln
12 MAIDEN NAME OF MOTHER: Lucy Nagler	22 MAIDEN NAME OF MOTHER: Clara J Hill

(Div. 4) (Cert. 4 issued July 27-1916 — Div. 21-1919)

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 28th day of February 1920

Certificate issued March (Month) 4 (Day) 1920 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 91 Park St., (If marriage was solemnized in a church, give its NAME instead of street and number)

7 Ward ..... Newton (Name of city or town) on March (Month) 6 (Day) 1920 (Year)

Name Harry Lutz Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 91 St., City or town of Newton, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

3-28: 100,000

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Southborough (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. 5 — Intention No. ____

GROOM	BRIDE
3 FULL NAME: Edward John Goggin	13 FULL NAME: Anastasia Mary Campbell (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 23 (Years)	14 AGE AT LAST BIRTHDAY: 25 (Years)
5 COLOR: Wh	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Marlborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First
8 SINGLE, WIDOWED, OR DIVORCED: Sing'l	18 SINGLE, WIDOWED, OR DIVORCED: Sing'l
9 OCCUPATION: Telephone Lineman	19 OCCUPATION: Stenographer
10 BIRTHPLACE: Marlborough, Mass. (City or town) (State or country)	20 BIRTHPLACE: Trukoburg Mass. (City or town) (State or country)
11 NAME OF FATHER: Edward J. Goggin	21 NAME OF FATHER: Stephen Campbell
12 MAIDEN NAME OF MOTHER: Ellen Gibney	22 MAIDEN NAME OF MOTHER: Josephine Walsh.

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of May 1920

Certificate issued May 29, 1920 (Month) (Day) (Year) by Asa L. Fairbanks (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward ____ Southborough, Mass. (Name of city or town) on June 2, 1920 (Month) (Day) (Year)
Name James P. Keurran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. Boston Road St., City or town of Southborough Mass.

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town) South Borough (City or Town)

2 Date of Marriage (Month) (Day) (Year) — Registered No. — Intention No.

GROOM		BRIDE	
3 FULL NAME: James Harold MacDonald		13 FULL NAME: Rachel Harriet Lamprey (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 26 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Athol Mass		16 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	8 SINGLE, WIDOWED, OR DIVORCED: Sing'l	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: Sing'l
9 OCCUPATION: Book Keeper		19 OCCUPATION: Clerk	
10 BIRTHPLACE: Athol (City or town) Mass (State or country)		20 BIRTHPLACE: South Borough (City or town) Mass (State or country)	
11 NAME OF FATHER: James Henry MacDonald		21 NAME OF FATHER: Norval A Lamprey	
12 MAIDEN NAME OF MOTHER: Catherine Murchie		22 MAIDEN NAME OF MOTHER: Lillian B Hyde	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this 26th day of May 1920

Certificate issued June 2 (Month) 1920 (Day) (Year) by Chas L Fairbanks (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Upland St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward, (Name of city or town) on June (Month) 6 (Day) 1920 (Year)

Name Rev. Franklin Slade Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

5
(City or Town)

1 PLACE OF MARRIAGE

City or Town _____
(Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year)

Registered No. _____

Intention No. _____

GROOM	BRIDE
3 FULL NAME: Patrick Michael Salmon	13 FULL NAME: Ellen Theresa O'Connell (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 53 (Years)	5 COLOR: White
14 AGE AT LAST BIRTHDAY: 47 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd	8 SINGLE, WIDOWED, OR DIVORCED: widowed
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Superintendent	19 OCCUPATION: Housekeeper
10 BIRTHPLACE: Southborough (City or town) Mass. (State or country)	20 BIRTHPLACE: Marlborough (City or town) Mass (State or country)
11 NAME OF FATHER: Patrick Salmon	21 NAME OF FATHER: David O'Connell
12 MAIDEN NAME OF MOTHER: Katherine Burke	22 MAIDEN NAME OF MOTHER: Johannah Toomey

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this second day of June 1920

Certificate issued June 8, 1920 (Month) (Day) (Year) by Marjorie M. Faulkner (City or Town Clerk or Registrar) Asst Clk.

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward _____ Southboro (Name of city or town) on June 10, 1920 (Month) (Day) (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk _____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town ____
(Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year)

Registered No. 9

Intention No. ____

GROOM	BRIDE
3 FULL NAME: Albert Francis Brown	13 FULL NAME: Gladys Isabel O'Leary (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Natick, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: machinist	19 OCCUPATION: at home
10 BIRTHPLACE: Natick (City or town) Mass. (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass (State or country)
11 NAME OF FATHER: George Warren Brown	21 NAME OF FATHER: Harry C. O'Leary
12 MAIDEN NAME OF MOTHER: Lulu Howe Bacon	22 MAIDEN NAME OF MOTHER: Lunette Isabel Eustis

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 11th day of June 1920

Certificate issued June (Month) 16 (Day) 1920 (Year) by Maurice M. Tailbanks (City or Town Clerk or Registrar) asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 4 Worcester St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) Framingham on June (Month) 20 (Day) 1920 (Year)

Name Franklin Hutchison Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 4 Worcester St., City or town of Framingham

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 8

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Osgood Raymond Flagg	13 FULL NAME: Olive Dawin (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Electrical Engineer	19 OCCUPATION: Librarian
10 BIRTHPLACE: Framingham (City or town) Mass (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass (State or country)
11 NAME OF FATHER: Charles Osgood Flagg	21 NAME OF FATHER: Harry W. Dawin
12 MAIDEN NAME OF MOTHER: Lella B. Hibbs	22 MAIDEN NAME OF MOTHER: Alice D. Ingalls

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fifth day of June 1920

Certificate issued June (Month) 17 (Day) 1920 (Year) by Marjorie M. Fairbanks asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Fatheguanna Rd St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on 28 (Month) June (Day) 1920 (Year)

Name William A. Knight Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 9 Vernon St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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11-13-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. 10 Intention No. .....

GROOM	BRIDE
3 FULL NAME Michael John Daly	13 FULL NAME Annie Jeannette Ramelli (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 25 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Somerville Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Mechanic	19 OCCUPATION Compositor
10 BIRTHPLACE Somerville (City or town) Mass. (State or country)	20 BIRTHPLACE Southborough (City or town) Mass (State or country)
11 NAME OF FATHER John Daly	21 NAME OF FATHER Lazarus Ramelli
12 MAIDEN NAME OF MOTHER Margaret Burger	22 MAIDEN NAME OF MOTHER Giuditta Borella

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of June 1920

Certificate issued June (Month) 27 (Day) 1920 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) Asst Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southboro (Name of city or town) June (Month) 29, (Day) 1920 (Year)

Name James P. Cahran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd. St., City or town of Southboro. Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

South Boroughs (City or Town)

1 PLACE OF MARRIAGE

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year)

Registered No. 4

Intention No. 4

GROOM	BRIDE
3 FULL NAME: Robert Leslie Hobden	13 FULL NAME: Lois Phelena Wheeler (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 21 (Years)	14 AGE AT LAST BIRTHDAY: 17 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Ashland Mass	16 RESIDENCE AT TIME OF MARRIAGE: South Borough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1
8 SINGLE, WIDOWED, OR DIVORCED: Sngl	18 SINGLE, WIDOWED, OR DIVORCED: Sngl
9 OCCUPATION: Textile	19 OCCUPATION: Telephone Operator
10 BIRTHPLACE: Montreal (City or town) Canada (State or country)	20 BIRTHPLACE: Abington (City or town) Conn (State or country)
11 NAME OF FATHER: Robert Leslie Hobden	21 NAME OF FATHER: Howard O Wheeler
12 MAIDEN NAME OF MOTHER: Florence Fowler	22 MAIDEN NAME OF MOTHER: Ethel S Hawley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Boroughs (Name of city or town) according to law, this Fifteenth day of May 1920.

Certificate issued June 1 (Month) 1920 (Day) (Year) by Chas L Fairbanks Town Clerk (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 11½ St Elmo Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

10 Ward Worcester (Name of city or town) on July (Month) 2 (Day) 1920 (Year)

Name Wm R. McNutt Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 11 St Elmo Road St., City or town of Worcester Mass

25 Certificate received by city or town clerk _____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-13-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. 11 Intention No. .....

GROOM	BRIDE
3 FULL NAME: Charles Henry Pugh	13 FULL NAME: Helen Frances Bigelow (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 33 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Westborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Florist	19 OCCUPATION: At Home
10 BIRTHPLACE: Castle Morton, England (City or town) (State or country)	20 BIRTHPLACE: Petersham, Mass (City or town) (State or country)
11 NAME OF FATHER: George Samuel Pugh	21 NAME OF FATHER: Daniel F. Bigelow
12 MAIDEN NAME OF MOTHER: Elizabeth Wellstead	22 MAIDEN NAME OF MOTHER: Julia Brown

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of June 1920

Certificate issued June (Month) 27 (Day) 1920 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) Asst Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at ~~No.~~ St. Mark's Church, St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on July (Month) 20 (Day) 1920 (Year)

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St. St., City or town of Southborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-103

MARGIN RESERVED FOR BINDING

N. B. — WRITE PLAINLY, WITH UNFADING BLACK INK — THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

4-12-'19. 10,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE
City or town ..... Registered No. .....

2 DATE OF MARRIAGE ..... (Month) (Day) (Year) Return of city or town of .....

GROOM		BRIDE	
3 FULL NAME	George C. Erickson	13 FULL NAME (If a widow or divorced, give also maiden name)	Mildred H. Merritt
4 AGE AT LAST BIRTHDAY (Years)	23	14 AGE AT LAST BIRTHDAY (Years)	21
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	248 Cross St. Gardner	16 RESIDENCE AT TIME OF MARRIAGE	205 Washington St. Gardner
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	Single	18 SINGLE, WIDOWED, OR DIVORCED	Single
9 OCCUPATION	Clock assembler. ~~Stock expresser~~	19 OCCUPATION	Office Clerk
10 BIRTHPLACE (City or town) (State or country)	Sodermanland, Sweden	20 BIRTHPLACE (City or town) (State or country)	Gardner, Massachusetts
11 NAME OF FATHER	Carl Erikson	21 NAME OF FATHER	Fred C. Merritt
12 MAIDEN NAME OF MOTHER	Ellen Johnson	22 MAIDEN NAME OF MOTHER	Ida Coolidge

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ~~city~~ town) of Gardner according to law, this nineteenth day of July 1920

Certificate issued July 24 '20 19 by Benjamin F. Holden Town clerk
REGISTRAR

24 To the Town (City or town) Clerk of Southborough

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued July 24 1920 (Month) (Day) (Year)
by Benjamin F. Holden (Name of clerk) Clerk of the ~~city~~ (or town) of Gardner Massachusetts, and
that the persons named therein were joined in marriage by me, at No. ~~—~~ St. Mark's Church St.,
(If marriage was solemnized in a church, give its NAME instead of street and number)
— Ward in the ~~city~~ town) of Southborough on July 29th 1920

Name Robert F. Chenery Official station Clergyman
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough, Mass.

25 Received by city or town clerk 19

REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-13-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: South Borough (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) ____ (Day) ____ (Year) — Registered No. ____ Intention No. 13

GROOM		BRIDE	
3 FULL NAME: Franklin Orth Rose		13 FULL NAME: Henrietta Hunt (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 30 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 28 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Santa Monica Calif		16 RESIDENCE AT TIME OF MARRIAGE: Santa Monica, Calif	
7 NUMBER OF MARRIAGE: 2d (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: Divorced	17 NUMBER OF MARRIAGE: 1st (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Civil Engineer		19 OCCUPATION: None	
10 BIRTHPLACE: Dallas, Texas (City or town) (State or country)		20 BIRTHPLACE: Athens Ohio (City or town) (State or country)	
11 NAME OF FATHER: William Cowing Rose		21 NAME OF FATHER: John Standish Hunt	
12 MAIDEN NAME OF MOTHER: Emma Willoughby Ryder		22 MAIDEN NAME OF MOTHER: Mary Adelaide Juniper	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this second day of August 1920

Certificate issued August (Month) 12 (Day) 1920 (Year) by Chas L. Fairbanks (~~City or~~ Town Clerk ~~or Registrar~~)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at ~~No.~~ South borough Mass ~~St.~~, (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward ____ (Name of city or town) on August (Month) 23 (Day) 1920 (Year)
Name Albert E. Dunning Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. 43 Druce St., City or town of Brookline

25 Certificate received by city or town clerk ____ (Month) ____ (Day) ____ (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-13-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Southborough (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) ____ (Day) ____ (Year) Registered No. 14

Intention No. ____

GROOM	BRIDE
3 FULL NAME: Felip Paul	13 FULL NAME: Corinne Jessie La Liberte (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 28 (Years)	14 AGE AT LAST BIRTHDAY: 27 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Millbury, Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Weaver	19 OCCUPATION: Weaver
10 BIRTHPLACE: Pierreville P.Q. Canada (City or town) (State or country)	20 BIRTHPLACE: Southborough Mass. (City or town) (State or country)
11 NAME OF FATHER: Joseph Paul	21 NAME OF FATHER: Frank La Liberte
12 MAIDEN NAME OF MOTHER: Eva Traversiere	22 MAIDEN NAME OF MOTHER: Mary Lavalette

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or Town) of Southborough (Name of city or town) according to law, this seventh day of August 1920

Certificate issued August (Month) 14 (Day) 1920 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) on September (Month) 6 (Day) 1920 (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Breton Rd St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk ____ (Month) ____ (Day) ____ (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

MARGIN RESERVED FOR BINDING

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Patrick J. Brock	13 FULL NAME: Emmie R. Doolittle (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 32 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Hopkinton, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Forester	19 OCCUPATION: at home
10 BIRTHPLACE: Hopkinton (City or town) Mass (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass (State or country)
11 NAME OF FATHER: Patrick F. Brock	21 NAME OF FATHER: Emery Doolittle
12 MAIDEN NAME OF MOTHER: Mary Morrill	22 MAIDEN NAME OF MOTHER: Lillian Bleadhill

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this third day of September 1920

Certificate issued September 13 1920 (Month) (Day) (Year) by Maxine M. Fairbanks asst. (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. John's Rectory St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ____ (Name of city or town) Hopkinton on September 15th 1920 (Month) (Day) (Year)

Name Fabian J. O'Connell Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 33 Main St., City or town of Hopkinton, Mass.

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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9 20

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM		BRIDE	
3 FULL NAME	Harry Williams Young	13 FULL NAME (If a widow or divorced, give also maiden name)	Agnes Hill
4 AGE AT LAST BIRTHDAY (Years)	48	14 AGE AT LAST BIRTHDAY (Years)	30
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Cambridge Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	2 nd	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st
8 SINGLE, WIDOWED, OR DIVORCED	Widowed	18 SINGLE, WIDOWED, OR DIVORCED	Single
9 OCCUPATION	Proprietor General Store	19 OCCUPATION	Nurse
10 BIRTHPLACE (City or town) (State or country)	Matinicus Maine	20 BIRTHPLACE (City or town) (State or country)	Newfoundland
11 NAME OF FATHER	Henry Young	21 NAME OF FATHER	William J. Hill
12 MAIDEN NAME OF MOTHER	Julia Fairbanks	22 MAIDEN NAME OF MOTHER	Sophia Porter

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 4th day of September 1920

Certificate issued September 11 1920 (Month) (Day) (Year) by Marjorie M. Fairbanks asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 7 Banning Road in Ward Brookline (Name of city or town) on Sept. 15. 1920 (Month) (Day) (Year)

(If marriage was solemnized in a church, give its NAME instead of street and number)

Name James H. Pearson Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 69 Hollis St., City or town of South Weymouth, Mass.

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) ____ (Day) ____ (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Arthur Latham Clough Jr.	13 FULL NAME: Manuel Marguerite Darling (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	14 AGE AT LAST BIRTHDAY: 25 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Brockton Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Shoe Cutter	19 OCCUPATION: Shoe worker
10 BIRTHPLACE: Boston (City or town) Mass (State or country)	20 BIRTHPLACE: North Adams (City or town) Mass (State or country)
11 NAME OF FATHER: Arthur L. Clough	21 NAME OF FATHER: Arthur Darling
12 MAIDEN NAME OF MOTHER: Sarah E. Scanlon	22 MAIDEN NAME OF MOTHER: Rose Mattison

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this thirtieth day of August 1920

Certificate issued September 5, 1920 (Month) (Day) (Year) by Marjorie M. Faulkner asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 50 W. Rossetter St., (If marriage was solemnized in a church, give its NAME instead of street and number)

7th Ward Brockton (Name of city or town) on Sept. 18, 1920 (Month) (Day) (Year)

Name Claude Allen McKay Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 50 W. Rossetter St., City or town of Brockton, Mass.

25 Certificate received by city or town clerk ____ (Month) ____ (Day) ____ (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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MARGIN RESERVED FOR BINDING

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town: ____ (Do not enter name of village or section of city or town)

2 Date of Marriage: ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Vittorio Cantassa	13 FULL NAME: Mary Zambeni (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Fitchburg Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Molder	19 OCCUPATION: Tailoress
10 BIRTHPLACE (City or town): Italy (State or country)	20 BIRTHPLACE (City or town): Italy (State or country)
11 NAME OF FATHER: Guiseppe Cantassa	21 NAME OF FATHER: Unknown
12 MAIDEN NAME OF MOTHER: Antonia Vangelista	22 MAIDEN NAME OF MOTHER: Unknown

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 2nd day of September 1920

Certificate issued September (Month) 7 (Day) 1920 (Year) by Marjorie M. Fairbanks Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) on September (Month) 22 (Day) 1920 (Year)

Name James P Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME: Ernest Mayo Jacobs	13 FULL NAME: Clara Helen Miller (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 37 (Years)	14 AGE AT LAST BIRTHDAY: 25 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Allston Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2d	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Divorced	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Theatrical Agency	19 OCCUPATION: At home
10 BIRTHPLACE: Brooks Maine (City or town) (State or country)	20 BIRTHPLACE: Southborough Mass (City or town) (State or country)
11 NAME OF FATHER: Frank W Jacobs	21 NAME OF FATHER: George W Miller
12 MAIDEN NAME OF MOTHER: Laura E Hains	22 MAIDEN NAME OF MOTHER: Bertha Alton Smith

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this Sixteenth day of September 1920

Certificate issued September (Month) 22 (Day) 1920 (Year) by Marjorie M Fairbanks Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Fayville St., (If marriage was solemnized in a church, give its NAME instead of street and number) in Ward (Name of city or town) Southborough on September (Month) 22nd (Day) 1920 (Year)

Name Franklin Hutchinson Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 4 Worcester Street St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

Certified copy of Divorce Decree of Sept. 9, 1920 attached

Commonwealth of Massachusetts.

SUFFOLK, ss.

I hereby certify that at the SUPERIOR COURT holden at Boston, within and for the County of Suffolk, on the eighth day of March A.D. 1920, a divorce from the BOND OF MATRIMONY —Nisi—was decreed by the Court, between Ernest M. Jacobs of said Boston libellant, and Adelaide L. Jacobs of parts unknown libellee, in favor of said libellant, for the cause which is fully set forth in the libel on file in said court to wit:

Desertion on the part of the said libellee:-

to become absolute after the expiration of six months, unless the Court shall have for sufficient cause, on application of any party interested, otherwise ordered.

And on the ninth day of September A.D. 1920 the said six months having expired, and the Court not having otherwise ordered, said decree became absolute.

In testimony whereof I have hereunto set my hand, and affixed the seal of said Court, at Boston, this fourteenth day of September A.D., 1920.

Edmund L. Phinney Asst.
Clerk.

Form 70—9-19-'18—2500

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage (Month) September (Day) 14 (Year) 1920 Registered No. Intention No.

GROOM	BRIDE
3 FULL NAME: William Samuel McKie	13 FULL NAME: Ruth Marion Sadd (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 27 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Mill operative	19 OCCUPATION: Milliner
10 BIRTHPLACE: Boston (City or town) Mass (State or country)	20 BIRTHPLACE: Springvale (City or town) Maine (State or country)
11 NAME OF FATHER: Eldred E. McKie	21 NAME OF FATHER: Harry L. Sadd
12 MAIDEN NAME OF MOTHER: Ethel Fois	22 MAIDEN NAME OF MOTHER: Addie Pillsbury

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fourteenth day of September, 1920

Certificate issued September (Month) 20 (Day) 1920 (Year) by Maryone M. Fairbanks (City or Town Clerk or Registrar) Asst.

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southborough (Name of city or town) on September 22, 1920 (Month) (Day) (Year)

Name George H. Ewing Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 218 Hemenway St St., City or town of Boston.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM		BRIDE	
3 FULL NAME: Dominico Mannucci		13 FULL NAME: Maria D'Angelo (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 28 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 23 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough		16 RESIDENCE AT TIME OF MARRIAGE: Quincy, Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	8 SINGLE, WIDOWED OR DIVORCED: Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Laborer		19 OCCUPATION: Shoe worker	
10 BIRTHPLACE: (City or town)	Italy (State or country)	20 BIRTHPLACE: (City or town)	Italy (State or country)
11 NAME OF FATHER: Thomas Mannucci		21 NAME OF FATHER: Camillo D'Angelo	
12 MAIDEN NAME OF MOTHER: Paulomi Dias		22 MAIDEN NAME OF MOTHER: Maria Nicola Grazioso	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this seventh day of September 19 20

Certificate issued September 13 1920 (Month) (Day) (Year) by Marjorie M Fairbanks asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Sacred Heart Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) Boston on October 24th 1920 (Month) (Day) (Year)

Name Rev. Raphael D'Alfonso Official station Catholic Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 12 North Square St., City or town of Boston

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Daniel Francis Buckley	13 FULL NAME: Ellen Bryan Howes (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Barber	19 OCCUPATION: Clerk
10 BIRTHPLACE: Marlborough (City or town) Mass (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass. (State or country)
11 NAME OF FATHER: John J. Buckley	21 NAME OF FATHER: Seth W. Howes
12 MAIDEN NAME OF MOTHER: Elizabeth Brady	22 MAIDEN NAME OF MOTHER: Catherine Lavelle

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this nineteenth day of October 1920

Certificate issued October (Month) 25 (Day) 1920 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) Asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ Southboro (Name of city or town) on October (Month) 26 (Day) 1920 (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro Mass

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-13-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME: Luigi Morenzetti	13 FULL NAME: Eleanora Catalani (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 22 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Shrewsbury Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Mill operative	19 OCCUPATION: Mill operative
10 BIRTHPLACE: (City or town) ..... (State or country) Italy	20 BIRTHPLACE: (City or town) ..... (State or country) Italy
11 NAME OF FATHER: John Morenzetti	21 NAME OF FATHER: John C. Catalani
12 MAIDEN NAME OF MOTHER: Anninzia Mainelli	22 MAIDEN NAME OF MOTHER: Anna Carboni

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this first day of November 1920

Certificate issued November (Month) 6 (Day) 1920 (Year) by Margaret M Fairbanks Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 390 Main St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) Worcester on Nov 13th 1920 (Month) (Day) (Year)

Name Wm C Bread Official station Justice of The Peace (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 210 West St., City or town of Worcester Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage dec. 7th, 1920 (Month) (Day) (Year) Registered No. Intention No.

GROOM	BRIDE
3 FULL NAME Charles H. Bullens	13 FULL NAME May Laurence (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 30 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 27 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 2nd	18 SINGLE, WIDOWED, OR DIVORCED Widowed
9 OCCUPATION Mill hand	19 OCCUPATION House worker
10 BIRTHPLACE Marlborough, Mass. (City or town) (State or country)	20 BIRTHPLACE Ashford, Conn. (City or town) (State or country)
11 NAME OF FATHER Lowell Smith Bullens	21 NAME OF FATHER Joseph Jesbert
12 MAIDEN NAME OF MOTHER Elizabeth May Jordan	22 MAIDEN NAME OF MOTHER Emma May Jelbert

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this first day of December 1920

Certificate issued December (Month) 1920 (Day) (Year) by Marjorie M. Fairbanks asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at the home of the Misses Howe No. 4 Southville Road St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Southborough (Name of city or town) on December seventh, 1920 (Month) (Day) (Year)

Name Philip A. Goold Official station Clergyman, Methodist Episcopal Church (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Southville Road St., ~~City or~~ town of Southborough

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Harold Russell Chase	13 FULL NAME: Pearl Marion Bates (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 33 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Divorced
9 OCCUPATION: Machinist	19 OCCUPATION: Shoe worker
10 BIRTHPLACE: Southborough (City or town) Mass. (State or country)	20 BIRTHPLACE: Marlborough (City or town) Mass. (State or country)
11 NAME OF FATHER: Edward E. Chase	21 NAME OF FATHER: George L. Parker
12 MAIDEN NAME OF MOTHER: Clara G. Wakefield	22 MAIDEN NAME OF MOTHER: Mary Elizabeth Cutting

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this eighth day of December 1920

Certificate issued December (Month) 14 (Day) 1920 (Year) by Maibone M. Fairbanks (City or Town Clerk or Registrar) Asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 41 Pleasant St., (If marriage was solemnized in a church, give its NAME instead of street and number)

5 Ward Southborough (Name of city or town) on Dec. (Month) 14 (Day) 1920 (Year)

Name Ralph E. Conner Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 41 Pleasant St., City or town of Marlborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

Certified copy of Divorce Decree attached

Commonwealth of Massachusetts.

MIDDLESEX, SS.

I hereby certify that, at the SUPERIOR COURT holden within and for the County of Middlesex, on the eleventh day of June in the year of our Lord one thousand nine hundred and twenty, a divorce from the BOND OF MATRIMONY — Nisi — was decreed by the Court, between Pearl P. Battey, of Marlborough, in the County of Middlesex, and Joseph C. Battey, of Worcester, in the County of Worcester, in favor of said Pearl P. Battey, for the cause of desertion,

on the part of said Joseph C. Battey. And it was further ordered and decreed by the Court that the libellant, said Pearl P. Battey have the care and custody of their minor child, Joseph C. Battey.

Said decree nisi to become absolute after the expiration of six months from the entry thereof, unless the Court has for sufficient cause, on application of any party interested, otherwise ordered.

Said term of six months expired on the twelfth day of December A.D. 19 20, and I certify that the Court had not otherwise ordered.

In testimony whereof I have hereunto set my hand, and affixed the seal of said Court, at Cambridge, this thirteenth day of December, A.D. 19 20

Wm C Dillingham *Clerk.*

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Southborough (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage ____ (Month) (Day) (Year) Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Hugh William Carroll	13 FULL NAME: Caroline Gertrude Mattioli (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 27 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Irving Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Grocer	19 OCCUPATION: Teacher
10 BIRTHPLACE: Irving (City or town) Mass (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass (State or country)
11 NAME OF FATHER: Michael W. Carroll	21 NAME OF FATHER: Ercoli Mattioli
12 MAIDEN NAME OF MOTHER: Mary Moran	22 MAIDEN NAME OF MOTHER: Rose Ann Ferguson

23 THE INTENTION OF MARRIAGE By the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-third day of December 1920

Certificate issued December (Month) 28 (Day) 1920 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) asst.

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. St. Anns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward ____ Southboro (Name of city or town) on Dec. (Month) 29 (Day) 1920 (Year)
Name James P Kernan Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. Boston Road St., City or town of Southboro, mass

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME: Merack Kaheian	13 FULL NAME: Nuvart Kaiserian (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	14 AGE AT LAST BIRTHDAY: 22 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Farmer	19 OCCUPATION: Housekeeper
10 BIRTHPLACE: (City or town) Armenia (State or country)	20 BIRTHPLACE: (City or town) Armenia (State or country)
11 NAME OF FATHER: Nechan Kaheian	21 NAME OF FATHER: Garabed Kaiserian
12 MAIDEN NAME OF MOTHER: Lusaper Eger	22 MAIDEN NAME OF MOTHER: Mary Torosian

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this Twelfth day of January 1921

Certificate issued January 18, 1921 (Month) (Day) (Year) by Marion M. Fairbanks asst (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Jan. 23 (Month) (Day) 1921 (Year)

Name Hagop Paredaghamian Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 30 Millmont St. St., City or town of Roxbury

25 Certificate received by city or town clerk Jan. 26, 1921 (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME Setrag Kaherian	13 FULL NAME Angel Baleiq (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 35 (Years)	14 AGE AT LAST BIRTHDAY 29 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 2nd	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
8 SINGLE, WIDOWED, OR DIVORCED Widowed	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Farmer	19 OCCUPATION Housekeeper
10 BIRTHPLACE Nersa (City or town) Armenia (State or country)	20 BIRTHPLACE Constantinople (City or town) Turkey (State or country)
11 NAME OF FATHER Nechan Kaherian	21 NAME OF FATHER Nurgn Baleiq
12 MAIDEN NAME OF MOTHER Suvasapr Egeir	22 MAIDEN NAME OF MOTHER Rose Oraguia

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twelfth day of January 19 21

Certificate issued January (Month) 15 (Day) 1921 (Year) by Marjorie M. Fairbanks asst. (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) Southboro on Jan. 23. 1921 (Month) (Day) (Year)

Name Hagot Paratchanian Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 30, Millmore St. St., City or town of Roxbury, Mass

25 Certificate received by city or town clerk Jan. 25, 1921 (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — Southborough (City or Town)

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year) Registered No. _____ Intention No. _____

GROOM	BRIDE
3 FULL NAME: Henry Fry	13 FULL NAME: Elsbet Coutts (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 45 (Years)	14 AGE AT LAST BIRTHDAY: 35 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Farm hand	19 OCCUPATION: Waitress
10 BIRTHPLACE: England (City or town) (State or country)	20 BIRTHPLACE: Scotland (City or town) (State or country)
11 NAME OF FATHER: John Fry	21 NAME OF FATHER: Alexander Coutts
12 MAIDEN NAME OF MOTHER: Elizabeth Grace Medland	22 MAIDEN NAME OF MOTHER: Jane Simon

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-third day of March 1921

Certificate issued March (Month) 28 (Day) 1921 (Year) by Marjorie M. Fairbanks Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Main St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward _____ Southborough (Name of city or town) on April (Month) 6 (Day) 1921 (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk _____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME William J. Griffin	13 FULL NAME Mary Sloan (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 34 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 42 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Portsmouth, N. H.	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 2nd	18 SINGLE, WIDOWED, OR DIVORCED Widowed
9 OCCUPATION Lumber Dealer	19 OCCUPATION Housework
10 BIRTHPLACE Nova Scotia (City or town) (State or country)	20 BIRTHPLACE Ireland (City or town) (State or country)
11 NAME OF FATHER William Griffin	21 NAME OF FATHER Charles Sloan
12 MAIDEN NAME OF MOTHER Mary Elizabeth Freeman	22 MAIDEN NAME OF MOTHER Elizabeth Lynn

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-fifth day of April 1921

Certificate issued April (Month) 30 (Day) 1921 (Year) by Marjorie M. Fairbanks Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Ann's Rectory St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southboro (Name of city or town) on May (Month) 3, (Day) 1921 (Year)

Name Henry J. McCann Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Frank Bibo	13 FULL NAME Incoronato Riccio (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 32 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE 414 Summer Street East Boston, Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Laborer	19 OCCUPATION At home
10 BIRTHPLACE Italy (City or town) (State or country)	20 BIRTHPLACE Italy (City or town) (State or country)
11 NAME OF FATHER Antonio Bibo	21 NAME OF FATHER Frank Riccio
12 MAIDEN NAME OF MOTHER Rosie Chelsea	22 MAIDEN NAME OF MOTHER Lucia Pascucci

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-first day of April 1921

Certificate issued April (Month) 26 (Day) 1921 (Year) by Marjorie M. Fairbanks asst (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. St. Marcissus Ch. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on May (Month) 8 (Day) 1921 (Year)

Name Pietro Guarchi Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 336 Waverly St., City or town of Framingham Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Sherborn, Mass (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage June (Month) 8 (Day) 21 (Year) Registered No. Intention No.

GROOM		BRIDE	
3 FULL NAME Francis Grout		13 FULL NAME Hilda Aldena Borgeson (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 23 (Years)	5 COLOR White	14 AGE AT LAST BIRTHDAY 31 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Sherborn, Mass		16 RESIDENCE AT TIME OF MARRIAGE Southborough	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	8 SINGLE, WIDOWED, OR DIVORCED Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Farmer		19 OCCUPATION Dressmaker	
10 BIRTHPLACE Sherborn (City or town)	(State or country)	20 BIRTHPLACE Medford (City or town)	Mass (State or country)
11 NAME OF FATHER George Grout		21 NAME OF FATHER Adolph Borgeson	
12 MAIDEN NAME OF MOTHER Nellie Daniels		22 MAIDEN NAME OF MOTHER Othelia Lundgin	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 26th day of May 1921

Certificate issued June (Month) 1 (Day) 1921 (Year) by Chas L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 1st Congregational Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Sherborn (Name of city or town) on June (Month) 8 (Day) 1921 (Year)

Name William D. Wilkie Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 37 Pleasant St., City or town of (So) Natick

25 Certificate received by city or town clerk June (Month) 11 (Day) 21 (Year) C L Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Marlb (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM		BRIDE	
3 FULL NAME: John Francis Mc Donough		13 FULL NAME: Nora Sullivan (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 63 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 37 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: South Borough		16 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Shoe Worker		19 OCCUPATION: Shoe Worker	
10 BIRTHPLACE: South Borough (City or town) Mass. (State or country)		20 BIRTHPLACE: Ireland (City or town) (State or country)	
11 NAME OF FATHER: Patrick Mc Donough		21 NAME OF FATHER: John Sullivan	
12 MAIDEN NAME OF MOTHER: Judith Bagley		22 MAIDEN NAME OF MOTHER: Elizabeth Crotty	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this 26th day of May 1921.

Certificate issued May (Month) 31 (Day) 1921 (Year) by Chas L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 17 Washington St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on June 8 (Month) (Day) 1921 (Year)

Name Edmund A Lowney Official station Catholic Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 17 Washington St., City or town of Marlboro

25 Certificate received by city or town clerk June (Month) 10 (Day) 1921 (Year) C L Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Edmund Lawrence Kelley		13 FULL NAME: Emma Russen (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 20 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 21 (26) (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.		16 RESIDENCE AT TIME OF MARRIAGE: Bellingham Mass	
7 NUMBER OF MARRIAGE: First (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: =	17 NUMBER OF MARRIAGE: First (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED
9 OCCUPATION: Metal Worker		19 OCCUPATION: Stenographer	
10 BIRTHPLACE: Southborough (City or town)	(State or country)	20 BIRTHPLACE: Providence R I (City or town)	(State or country)
11 NAME OF FATHER: Daniel F Kelley		21 NAME OF FATHER: Andrew P Russen	
12 MAIDEN NAME OF MOTHER: Julia M Callanan		22 MAIDEN NAME OF MOTHER: Martha D Nelson	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-fourth day of June 1921.

Certificate issued June 29 1921 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Boston Road St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... City or Town Southborough on July 2 1921 (Name of city or town) (Month) (Day) (Year)

Name James P. Conran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southborough Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

Southborough (City or Town)

1 PLACE OF MARRIAGE

City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Godfrey Brinley	13 FULL NAME Marion Burnett Fay (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 42 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 32 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED =
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED =
9 OCCUPATION Teacher	19 OCCUPATION School Work
10 BIRTHPLACE Hartford (City or town) Conn (State or country)	20 BIRTHPLACE Southborough (City or town) Mass. (State or country)
11 NAME OF FATHER George P Brinley	21 NAME OF FATHER Waldo B Fay
12 MAIDEN NAME OF MOTHER Mary Elizabeth Carter	22 MAIDEN NAME OF MOTHER Mary Elizabeth Winchester

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this twenty-third day of June 1921

Certificate issued June (Month) 28 (Day) 1921 (Year) by Cue L Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mark's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) ~~Ward~~ Southborough (Name of city or town) on July (Month) 14 (Day) 1921 (Year)

Name Rev. William G. Thayer Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Mark School St., City or town of Southborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Southborough (City or Town)

(Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Donald Newcomb Dinsmore	13 FULL NAME: Elizabeth Dorothy Lockett (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 22 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: White	15 COLOR:
6 RESIDENCE AT TIME OF MARRIAGE: Greenfield Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, - Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: =	18 SINGLE, WIDOWED, OR DIVORCED:
9 OCCUPATION: Mail Carrier	19 OCCUPATION: Teacher
10 BIRTHPLACE: Greenfield (City or town) Mass. (State or country)	20 BIRTHPLACE: Brooklyn, - N.Y. (City or town) (State or country)
11 NAME OF FATHER: Charles Wells Dinsmore	21 NAME OF FATHER: John J Lockett
12 MAIDEN NAME OF MOTHER: Jessie Mary Newcomb	22 MAIDEN NAME OF MOTHER: Elizabeth Campbell

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twenty-third day of July 1921

Certificate issued August 3 1921 (Month) (Day) (Year) by Chas L Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Main St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on August 15 1921 (Month) (Day) (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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11-18-19./60,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Lowell (Do not enter name of village or section of city or town) — South Boroughs (City or Town)

2 Date of Marriage August 25, 1921 (Month) (Day) (Year) — Registered No. — Intention No.

GROOM		BRIDE	
3 FULL NAME	Wendell Fredrick Smith	13 FULL NAME (If a widow or divorced, give also maiden name)	Miriam Wyman Kempton
4 AGE AT LAST BIRTHDAY (Years)	23	14 AGE AT LAST BIRTHDAY (Years)	22
5 COLOR	Wh	15 COLOR	Wh
6 RESIDENCE AT TIME OF MARRIAGE	South Boroughs, Mass.	16 RESIDENCE AT TIME OF MARRIAGE	Lowell, - Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	=	18 SINGLE, WIDOWED, OR DIVORCED	
9 OCCUPATION	Pomologist	19 OCCUPATION	At home
10 BIRTHPLACE (City or town)	Utica (State or country) NY	20 BIRTHPLACE (City or town)	Janesville, - Wis (State or country)
11 NAME OF FATHER	Dwight E Smith	21 NAME OF FATHER	Arthur Kempton
12 MAIDEN NAME OF MOTHER	Carrie E Merrill	22 MAIDEN NAME OF MOTHER	Anna Wyman

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Boroughs (Name of city or town) according to law, this Fourth day of August 1921

Certificate issued August (Month) 13 (Day) 1921 (Year) by Chas. L Fairbanks (City or ~~Town~~ Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 62 Fairmount St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Lowell (Name of city or town) on August (Month) 25 (Day) 1921 (Year)

Name Edward Babcock Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 62 Fairmount St., City or town of Lowell

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town) — South Borough (City or Town)

2 Date of Marriage ____ (Month) ____ (Day) ____ (Year) — Registered No. ____ — Intention No. ____

GROOM	BRIDE
3 FULL NAME: Walter E Williams	13 FULL NAME: Edith M. Jonah (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 28 (Years)	14 AGE AT LAST BIRTHDAY: 27 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Worcester Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: —	18 SINGLE, WIDOWED, OR DIVORCED:
9 OCCUPATION: Electrician	19 OCCUPATION: Nurse
10 BIRTHPLACE: Marlborough (City or town) Mass (State or country)	20 BIRTHPLACE: Grangeville (City or town) N B (State or country)
11 NAME OF FATHER: Fred E Williams	21 NAME OF FATHER: George A. Jonah
12 MAIDEN NAME OF MOTHER: Cristina Barri	22 MAIDEN NAME OF MOTHER: Elizabeth Wilson

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of South Borough (Name of city or town) according to law, this second day of September 1921.

Certificate issued September (Month) 7 (Day) 1921 (Year) by Chas. L. Fairbanks (City or Town Clerk or ~~Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 30 Russell St., (If marriage was solemnized in a church, give its NAME instead of street and number) 9 Ward Worcester (Name of city or town) on Sept. (Month) 7th (Day) 1921 (Year)

Name Charles Allen Fisher Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 90 Russell St., City or town of Worcester

25 Certificate received by city or town clerk ____ (Month) ____ (Day) ____ (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

Southborough (City or Town)

1 PLACE OF MARRIAGE

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year) Registered No. _____ Intention No. _____

GROOM	BRIDE
3 FULL NAME: Henry Dexter Rice	13 FULL NAME: Leona Florence De Mone (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 23 (Years)	14 AGE AT LAST BIRTHDAY: 22 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Hopkinton Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.
7 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)
8 SINGLE, WIDOWED, OR DIVORCED	18 SINGLE, WIDOWED, OR DIVORCED
9 OCCUPATION: Machinist	19 OCCUPATION: Typist
10 BIRTHPLACE: Hopkinton (City or town) Mass. (State or country)	20 BIRTHPLACE: Newton (City or town) Mass. (State or country)
11 NAME OF FATHER: Henry W. Rice	21 NAME OF FATHER: James De Mone
12 MAIDEN NAME OF MOTHER: Ezela Cheney	22 MAIDEN NAME OF MOTHER: Jennie Walker

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this thirteenth day of September 1921

Certificate issued Sept (Month) 21 (Day) '21 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Latisquama Road St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward _____ (Name of city or town) on September 21, 1921 (Month) (Day) (Year)

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. — Main St., City or town of Southborough Mass.

25 Certificate received by city or town clerk _____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town) — (City or Town): South Borough

2 Date of Marriage: (Month) (Day) (Year) — Registered No. — Intention No.

GROOM	BRIDE
3 FULL NAME: Carl Andrew Prendergast	13 FULL NAME: Delia Ellen Boland (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	14 AGE AT LAST BIRTHDAY: 25 (Years)
5 COLOR: White	15 COLOR:
6 RESIDENCE AT TIME OF MARRIAGE: Wellesley Mass.	16 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED:	18 SINGLE, WIDOWED, OR DIVORCED:
9 OCCUPATION: Receiving Clerk	19 OCCUPATION: at home
10 BIRTHPLACE: Natick Mass (City or town) (State or country)	20 BIRTHPLACE: South Borough Mass (City or town) (State or country)
11 NAME OF FATHER: Michael J Prendergast	21 NAME OF FATHER: William J Boland
12 MAIDEN NAME OF MOTHER: Fredericka Sondergrun	22 MAIDEN NAME OF MOTHER: Mary E Burke

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this fourteenth day of September 1921.

Certificate issued Sept 20 (Month) (Day) 1921 (Year) by Chas L. Fairbanks (~~City or~~ Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward South boro (Name of city or town) on September 24, 1921 (Month) (Day) (Year)

Name James F Coulan Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of South boro Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — South Borough (City or Town)

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year)

Registered No. _____

Intention No. _____

GROOM	BRIDE
3 FULL NAME: Robert Daniel Mahoney	13 FULL NAME: Marie Angelina Guertin (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 29 (Years)	14 AGE AT LAST BIRTHDAY: 26 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED	18 SINGLE, WIDOWED, OR DIVORCED: —
9 OCCUPATION: Mechanic	19 OCCUPATION: Shoe Worker
10 BIRTHPLACE: South Borough — Mass (City or town) (State or country)	20 BIRTHPLACE: Hudson, Mass (City or town) (State or country)
11 NAME OF FATHER: Daniel F Mahoney	21 NAME OF FATHER: Tancred Guertin
12 MAIDEN NAME OF MOTHER: Mary E Leahy	22 MAIDEN NAME OF MOTHER: Marie Balthazar

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this fifteenth day of September 1921.

Certificate issued September (Month) 27 (Day) 1921 (Year) by Chas L Fairbanks (City or ~~Town~~ Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mey's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward _____ Broad St (Name of city or town) on Sept 26 1921 (Month) (Day) (Year)

Name J. F. McLaughlin Official station Roman Catholic Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. No 26 Broad St., City or town of Marlboro Mass

25 Certificate received by city or town clerk _____ (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-18-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: (Do not enter name of village or section of city or town) Southborough (City or Town)

2 Date of Marriage: (Month) (Day) (Year) — Registered No. — Intention No.

GROOM		BRIDE	
3 FULL NAME	Celestino Berri	13 FULL NAME (If a widow or divorced, give also maiden name)	Elvira Rigolli
4 AGE AT LAST BIRTHDAY (Years)	30	14 AGE AT LAST BIRTHDAY (Years)	21
5 COLOR	white	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	=	18 SINGLE, WIDOWED, OR DIVORCED	
9 OCCUPATION	Laborer	19 OCCUPATION	Shoe worker
10 BIRTHPLACE (City or town)	Italy	20 BIRTHPLACE (City or town)	Italy
(State or country)		(State or country)	
11 NAME OF FATHER	Antonio Berri	21 NAME OF FATHER	Johann Rigolli
12 MAIDEN NAME OF MOTHER	Marriano Castignetti	22 MAIDEN NAME OF MOTHER	Louisa Legatti

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town)
of Southborough (Name of city or town) according to law, this twenty-ninth day of August 1921.
Certificate issued Sept 3 (Month) 1921 (Day) (Year) by Chas L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Tarcisius Church (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward Framingham (Name of city or town) on October 1st (Month) (Day) 1921 (Year)
Name Pietro Mascari Official station Priest
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. 336 Waverly St., City or town of Framingham

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

11-13-19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

South Boroughs (City or Town)

1 PLACE OF MARRIAGE

City or Town _____ (Do not enter name of village or section of city or town)

2 Date of Marriage _____ (Month) (Day) (Year) Registered No. _____ Intention No. _____

GROOM	BRIDE
3 FULL NAME: George Lewis Knies	13 FULL NAME: Blanche Arbutus Larkum (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 22 (Years)	14 AGE AT LAST BIRTHDAY: 22 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Auburn Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: —	18 SINGLE, WIDOWED, OR DIVORCED:
9 OCCUPATION: Gardener	19 OCCUPATION: Cashier
10 BIRTHPLACE: Framingham Mass (City or town) (State or country)	20 BIRTHPLACE: Worcester Mass (City or town) (State or country)
11 NAME OF FATHER: Lewis G. Knies	21 NAME OF FATHER: Harry A Larkum
12 MAIDEN NAME OF MOTHER: Hannah F Fitzgerald	22 MAIDEN NAME OF MOTHER: Ella S Beard

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Boroughs (Name of city or town) according to law, this Thirtieth day of September 1921.

Certificate issued October 6 1921 (Month) (Day) (Year) by Chas. L. Fairbanks (~~City or~~ Town Clerk ~~or Registrar~~)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at St. Joseph Church (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward _____ (Name of city or town) on Oct. 11 1921 (Month) (Day) (Year)

Name Rev. John P. Shannon Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Oxford St., City or town of Auburn

25 Certificate received by city or town clerk October 17 1921 (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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11-18-'19. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

South Borough
(City or Town)

1 PLACE OF MARRIAGE City or Town Beverly (Do not enter name of village or section of city or town)

2 Date of Marriage Oct. (Month) 15 (Day) 1921 (Year) Registered No. Intention No.

GROOM		BRIDE	
3 FULL NAME	Robert Burnett Choate	13 FULL NAME (If a widow or divorced, give also maiden name)	Katharine Schuyler Crosby
4 AGE AT LAST BIRTHDAY (Years)	23	14 AGE AT LAST BIRTHDAY (Years)	20
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	South Borough, Mass	16 RESIDENCE AT TIME OF MARRIAGE	Manchester, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	—	18 SINGLE, WIDOWED, OR DIVORCED	—
9 OCCUPATION	Journalist	19 OCCUPATION	At home
10 BIRTHPLACE (City or town) (State or country)	South Borough, Mass	20 BIRTHPLACE (City or town) (State or country)	Boston Mass
11 NAME OF FATHER	Charles F Choate, Jr.	21 NAME OF FATHER	Stephen V. R. Crosby
12 MAIDEN NAME OF MOTHER	Louise Burnett	22 MAIDEN NAME OF MOTHER	Henrietta M Green

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this thirty-first day of August 1921.

Certificate issued September (Month) 28 (Day) 1921 (Year) by Chas. L. Fairbanks (City or Town Clerk or ~~Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Johns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

6 Ward Beverly (Name of city or town) on October (Month) 15 (Day) 1921 (Year)

Name Nelson Par Carey Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 117, Valley St., City or town of Beverly (Farms)

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town (Do not enter name of village or section of city or town) South Borough (City or Town)

2 Date of Marriage (Month) (Day) (Year) — Registered No. — Intention No.

GROOM	BRIDE
3 FULL NAME: Louis Cardini	13 FULL NAME: Theresa Scampini (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	14 AGE AT LAST BIRTHDAY: 25 (Years)
5 COLOR: white	15 COLOR: white
6 RESIDENCE AT TIME OF MARRIAGE: Milford Mass.	16 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED	18 SINGLE, WIDOWED, OR DIVORCED
9 OCCUPATION: Shoe Worker	19 OCCUPATION: Shoe Worker
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: Italy (City or town) (State or country)
11 NAME OF FATHER: Louis Cardini	21 NAME OF FATHER: Louis Scampini
12 MAIDEN NAME OF MOTHER: Johanna Bonelli	22 MAIDEN NAME OF MOTHER: Angelina Asprsi

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this Seventeenth day of October 1921.

Certificate issued October 25 1921 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Anns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward, Southboro (Name of city or town) on Oct 31, 1921 (Month) (Day) (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town (Do not enter name of village or section of city or town) Southborough (City or Town)

2 Date of Marriage (Month) (Day) (Year) — Registered No. — Intention No.

GROOM	BRIDE
3 FULL NAME: Andrew J Miles	13 FULL NAME: Ruby M Wallace (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 57 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 38 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Somersworth, N.H.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): Second	8 SINGLE, WIDOWED, OR DIVORCED: Divorced
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Foreman on Construction Work	19 OCCUPATION: At home
10 BIRTHPLACE: Craftsbury (City or town) Vt (State or country)	20 BIRTHPLACE: Albany (City or town) Vt (State or country)
11 NAME OF FATHER: Edmund Miles	21 NAME OF FATHER: Thomas J Wallace
12 MAIDEN NAME OF MOTHER: Clarinda Whittemore	22 MAIDEN NAME OF MOTHER: Fannie M. Rogers

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twelfth day of November 1921.

Certificate issued November 18 1921 (Month) (Day) (Year) by Cora L. Fairbanks (City or ~~Town~~ Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Main St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward (Name of city or town) Southborough on November (Month) 23 (Day) 1921 (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

R-103

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

1-'20. 10,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE City or town Southborough, Mass. Registered No.

2 DATE OF MARRIAGE Nov. (Month) 27 (Day) 1921 (Year) Return of city or town of Southborough

GROOM	BRIDE
3 FULL NAME Charles M. Jacot	13 FULL NAME Alice Blanche Couch (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 46 (Years)	14 AGE AT LAST BIRTHDAY 40 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Stockbridge, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Stockbridge, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 2nd	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
8 SINGLE, WIDOWED, OR DIVORCED Widowed	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Jeweler	19 OCCUPATION Housekeeper
10 BIRTHPLACE Stockbridge (City or town) Mass (State or country)	20 BIRTHPLACE Tyngsham (City or town) Mass (State or country)
11 NAME OF FATHER Julius O. Jacot	21 NAME OF FATHER Byron Couch
12 MAIDEN NAME OF MOTHER Caroline Wittmann	22 MAIDEN NAME OF MOTHER Alice Slater

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (or town) of Stockbridge according to law, this 18th day of November 1921

Certificate issued Nov. 23 1921 by Adam Schilling REGISTRAR

24 To the Town (City or town) Clerk of Southborough

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued Nov. (Month) 23 (Day) 1921 (Year)

by Adam Schilling (Name of clerk) Clerk of the city (or town) of Stockbridge Massachusetts, and

that the persons named therein were joined in marriage by me, at ~~No.~~ St. Mark's Church St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward in the city (or town) of Southborough on Nov. 27, 1921

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough, Mass.

25 Received by city or town clerk 19 REGISTRAR

Groom. Wilbur F. Warren

Bride. Minnie G. Keene

Residence of Groom. Southboro, Mass.

" Bride. Southboro, Mass.

Age of Groom. 32

" Bride. 38

Color of Groom. White

" Bride. White

Occupation of Groom. Farmer

" Bride. At Home

Birthplace of Groom. Buckfield, Me.

" Bride. Hebron, Maine.

No. of Marriage of Groom. 1st

" Bride. 2nd

Groom Widowed or Divorced.

Bride " " " Div

Intention Filed. Nov. 23, 1921

By whom Married. Rev. W. H. Morrison

Residence. Nashua, N. H.

Official Station. Minister

Date of Marriage. Dec. 12th, 1921.

Place. Nashua, N. H.

[Record continued over.]

*Clergyman or Justice of the Peace.

[Record continued.]

GROOM'S FATHER AND MOTHER.

Father's Name ... Charles

" Residence ... Buckfield, Me

" Age* ... 35 ... Color ... white

" Occupation ... Lumberman

" Birthplace ... Buckfield

Mother's Name ... Rosa Etta Turner

" Residence ... Buckfield

" Age* ... 56 ... Color ... white

" Occupation ... Home

" Birthplace ... Buckfield, Me.

BRIDE'S FATHER AND MOTHER.

Father's Name ... Charles George

" Residence ... Hebron, Me.

" Age* ... 87 ... Color ... white

" Occupation ... Farmer

" Birthplace ... Plymouth, Mass.

Mother's Name ... Ruth Gurney

" Residence ... Hebron, Me.

" Age* ... 81 ... Color ... white

" Occupation ... Home

" Birthplace ... East Minot, Me.

THE STATE OF NEW HAMPSHIRE.

I hereby certify that the above marriage record is correct to the best of my knowledge and belief.

.....

Clerk of ... Nashua, N. H.

Date ... December 17th, 1921.

*If deceased, give age at death.

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....
Intention No. .....

GROOM	BRIDE
3 FULL NAME: Walter E. Fernald	13 FULL NAME: Elsie A. Hunt (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 19 (Years)	14 AGE AT LAST BIRTHDAY: 15 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Farmer	19 OCCUPATION: At home
10 BIRTHPLACE: Malden (City or town) Mass. (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass. (State or country)
11 NAME OF FATHER: Mark E. Fernald	21 NAME OF FATHER: Howard S. Hunt
12 MAIDEN NAME OF MOTHER: Emma Hanscom	22 MAIDEN NAME OF MOTHER: Ida May Liberty

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ..... (City or Town)
of Southborough (Name of city or town) according to law, this 16th day of December 1921
Certificate issued December (Month) 22 (Day) 1921 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) Asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)
Ward ..... (Name of city or town) on Dec (Month) 24 (Day) 1921. (Year)
Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)
Residence No. Main St., City or town of Southborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-103

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE
City or town ..... Registered No. .....

2 DATE OF MARRIAGE ..... Return of city or town of .....
(Month) (Day) (Year)

GROOM		BRIDE	
3 FULL NAME	John Joseph Wickham	13 FULL NAME (If a widow or divorced, give also maiden name)	Mabel Pearl Corbett
4 AGE AT LAST BIRTHDAY (Years)	24	14 AGE AT LAST BIRTHDAY (Years)	21
5 COLOR	White	15 COLOR	Wh
6 RESIDENCE AT TIME OF MARRIAGE	Lee Mass.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	First
8 SINGLE, WIDOWED, OR DIVORCED	S.	18 SINGLE, WIDOWED, OR DIVORCED	S.
9 OCCUPATION	Insurance Agent	19 OCCUPATION	Shoe worker
10 BIRTHPLACE (City or town) (State or country)	Lee Mass.	20 BIRTHPLACE (City or town) (State or country)	Southborough Mass.
11 NAME OF FATHER	John Wickham	21 NAME OF FATHER	Charles Edward Corbett
12 MAIDEN NAME OF MOTHER	Julia Noonan	22 MAIDEN NAME OF MOTHER	Marian Barnes

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (or town) of Southborough according to law, this Tenth day of February 1922

Certificate issued February 16 1922 by Chas L. Fairbanks REGISTRAR

24 To the ..... (City or town) Clerk of .....

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued ..... (Month) (Day) (Year)

by ..... (Name of clerk) Clerk of the city (or town) of ..... Massachusetts, and that the persons named therein were joined in marriage by me, at No. St. Vincent de Paul's Church, Rt., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward in the city (or town) of Lynn Dale on Feb. 25th 1922

Name John C. Foley Catholic Priest Official station Catholic Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Lynn Dale St., City or town of Lynn

25 Received by city or town clerk February 21 1922 Chas L. Fairbanks REGISTRAR

N. B. — WRITE PLAINLY, WITH UNFADING BLACK INK — THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

MARGIN RESERVED FOR BINDING

4-12-19. 10,000.

FORM R-101

MARGIN RESERVED FOR BINDING

N. B. — WRITE PLAINLY, WITH UNFADING BLACK INK — THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME James Elliott Riffin	13 FULL NAME Catherine Josephine McDonald (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 26 (Years)	14 AGE AT LAST BIRTHDAY 28 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
8 SINGLE, WIDOWED, OR DIVORCED Single	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Student	19 OCCUPATION Telephone Operator
10 BIRTHPLACE Dorchester, Mass (City or town) (State or country)	20 BIRTHPLACE Southborough Mass (City or town) (State or country)
11 NAME OF FATHER Elliott B. Riffin	21 NAME OF FATHER Thomas A. McDonald
12 MAIDEN NAME OF MOTHER Lydia T. Riffin	22 MAIDEN NAME OF MOTHER Mary Crowley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ..... (City or town)

of Southborough (Name of city or town) according to law, this 11th day of February 1922

Certificate issued February (Month) 17 (Day) 1922 (Year) by Maiyone M. Fairbanks (City or Town Clerk or Registrar) Asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Boston Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on February 28, 1922 (Month) (Day) (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass

25 Certificate received by city or town clerk ~~February~~ March 1 1922 (Month) (Day) (Year) C. H. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) .....

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Charles Curtis Hildreth	13 FULL NAME Nellie Grazina Chamberlain (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 66 (Years)	14 AGE AT LAST BIRTHDAY 41 (Years)
5 COLOR White	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE South Borough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) Second	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First
8 SINGLE, WIDOWED, OR DIVORCED Widower	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Carpenter	19 OCCUPATION Nurse
10 BIRTHPLACE South Borough Mass (City or town) (State or country)	20 BIRTHPLACE South Borough Mass (City or town) (State or country)
11 NAME OF FATHER Lawson Hildreth	21 NAME OF FATHER Joseph A Chamberlain
12 MAIDEN NAME OF MOTHER Mary E Davis	22 MAIDEN NAME OF MOTHER Hannah Gleshill

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this first day of April 1922

Certificate issued April (Month) 15 (Day) 1922 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

..... Ward ..... (Name of city or town) on ..... (Month) (Day) (Year)

Name ..... Official station .....
(Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ..... St., City or town of .....

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Louis William Ramelli	13 FULL NAME Kathleen Wallace Simpson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 24 (Years)	5 COLOR Wh
14 AGE AT LAST BIRTHDAY 26 (Years)	15 COLOR Wh
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass
7 NUMBER OF MARRIAGE first (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED S.
17 NUMBER OF MARRIAGE first (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED S.
9 OCCUPATION Electrician	19 OCCUPATION Nurse
10 BIRTHPLACE Southborough Mass (City or town) (State or country)	20 BIRTHPLACE Glasgow Scotland (City or town) (State or country)
11 NAME OF FATHER Lazaro Ramelli	21 NAME OF FATHER Alexander Simpson
12 MAIDEN NAME OF MOTHER Gertrude Borella	22 MAIDEN NAME OF MOTHER Agnes Johnson

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this first day of May 1922

Certificate issued May 8 1922 (Month) (Day) (Year) by Chas L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Convent House (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on May (Month) 8th (Day) 1922 (Year)

Name Robert W. McLeish Official station Justice of the Peace (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 10 Aspen St., City or town of Boston, Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22, 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town) — (City or town making return)

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: William Hinchcliffe Forristall	13 FULL NAME: Maybelle Manning (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Brookline, Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: S.
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: S.
9 OCCUPATION: Business Manager	19 OCCUPATION: Correspondence Supervisor
10 BIRTHPLACE: Arlington, Mass. (City or town) (State or country)	20 BIRTHPLACE: Rahway, N. J. (City or town) (State or country)
11 NAME OF FATHER: George L. Forristall	21 NAME OF FATHER: James Manning
12 MAIDEN NAME OF MOTHER: Sarah Celia Hinchcliffe	22 MAIDEN NAME OF MOTHER: Katherine Degan

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this first day of June 1922

Certificate issued June (Month) 13 (Day) 1922 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at ~~No.~~ St. Mark's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) — Ward ____ (Name of city or town) on June (Month) 14 (Day) 1922 (Year)

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ____ Main St., City or town of Southborough

25 Certificate received by city or town clerk June (Month) 16 (Day) 1922 (Year) C. L. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Garabad S. Sarajian	13 FULL NAME Margaret Mary Morris (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 30 (Years)	5 COLOR Wh	14 AGE AT LAST BIRTHDAY 30 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED S.	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED S.
9 OCCUPATION Farmer	19 OCCUPATION Domestic
10 BIRTHPLACE Armenia (City or town) (State or country)	20 BIRTHPLACE Boston Mass (City or town) (State or country)
11 NAME OF FATHER Stephen Sarajian	21 NAME OF FATHER Patrick Morris
12 MAIDEN NAME OF MOTHER Akabi Margossian	22 MAIDEN NAME OF MOTHER Annie

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this seventh day of June 1922

Certificate issued June 13 1922 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Main St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on June (Month) 16 (Day) 1922 (Year).

Name John L. Locke Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Clarence S Hosmer	13 FULL NAME: Edith Maude Lockett (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 23 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: Wh.	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: S.	18 SINGLE, WIDOWED, OR DIVORCED: S.
9 OCCUPATION: Plumber	19 OCCUPATION: At home
10 BIRTHPLACE: Westborough (City or town) Mass. (State or country)	20 BIRTHPLACE: Pascoag (City or town) R I (State or country)
11 NAME OF FATHER: Asa W Hosmer	21 NAME OF FATHER: John J Lockett
12 MAIDEN NAME OF MOTHER: Sadie May Fisher	22 MAIDEN NAME OF MOTHER: Elizabeth Campbell

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this Seventeenth day of June 1922

Certificate issued June (Month) 22 (Day) 1922 (Year) by Chas. L Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Pilgrim Congregational St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southboro (Name of city or town) on June (Month) 23, (Day) 1922 (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) .....

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Earle Russell Closson	13 FULL NAME: Marcia Dood Davis (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 25 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Newton Centre, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Teacher	19 OCCUPATION: Clerk
10 BIRTHPLACE: Marlborough (City or town), Mass (State or country)	20 BIRTHPLACE: Lawrence (City or town), Mass (State or country)
11 NAME OF FATHER: Eugene Closson	21 NAME OF FATHER: Myron Davis Jr.
12 MAIDEN NAME OF MOTHER: Emma L Russell	22 MAIDEN NAME OF MOTHER: Cora May Dood

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 11th day of June 1922

Certificate issued June (Month) 18 (Day) 1922 (Year) by Maynard M. Fairbanks Asst (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 78 Elmore St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Newton (Name of city or town) on June (Month) 24 (Day) 1922 (Year)

Name Henry F. Crake Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 108 Washington St., City or town of Malden

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Henry P. Kidder	13 FULL NAME Julia C. Howell (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 26 (Years)	5 COLOR White
	14 AGE AT LAST BIRTHDAY 19 (Years)
	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE South Braintree, Mass	16 RESIDENCE AT TIME OF MARRIAGE Boston Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED Single
	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Bank Clerk	19 OCCUPATION At home
10 BIRTHPLACE Boston (City or town) Mass (State or country)	20 BIRTHPLACE Quincy (City or town) Pa (State or country)
11 NAME OF FATHER Charles A. Kidder	21 NAME OF FATHER George D. Howell
12 MAIDEN NAME OF MOTHER Josephine Burnett	22 MAIDEN NAME OF MOTHER Bruce Hud

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Braintree (Name of city or town) according to law, this 31st day of May 1922

Certificate issued June (Month) 6 (Day) 1922 (Year) by Maynard M. Faulkner (City or Town Clerk or Registrar) Asst

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. Cathedral of St. Paul St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Boston (Name of city or town) on June (Month) 24 (Day) 1922 (Year)

Name Rev. Francis G. Thayer Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Monica's School St., City or town of Roxbury

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE - City or Town Southborough (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage June 26 1922 (Month) (Day) (Year) Registered No. Intention No.

GROOM	BRIDE
3 FULL NAME John McKinnon	13 FULL NAME Catherine Teresa Corbett (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 23 (Years)	5 COLOR Wh	14 AGE AT LAST BIRTHDAY 28 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE 649 Massachusetts Av. Boston Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass
7 NUMBER OF MARRIAGE first (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED S.	17 NUMBER OF MARRIAGE first (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED S.
9 OCCUPATION Painter	19 OCCUPATION Waitress
10 BIRTHPLACE Greendale N.S. (City or town) (State or country)	20 BIRTHPLACE St Johns Newfoundland (City or town) (State or country)
11 NAME OF FATHER James McKinnon	21 NAME OF FATHER Joseph Corbett
12 MAIDEN NAME OF MOTHER Mary J McDonald	22 MAIDEN NAME OF MOTHER Catherine Morrissey

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 19th day of June 1922

Certificate issued June 24 1922 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Southboro (Name of city or town) on June 26th 1922 (Month) (Day) (Year)

Name Henry J. McCann Official station R.C. Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Ann's Rectory St., City or town of Southboro Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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MARGIN RESERVED FOR BINDING

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return)

1 PLACE OF MARRIAGE

City or Town (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year) Registered No. Intention No.

GROOM	BRIDE
3 FULL NAME Edward Thomas Roach	13 FULL NAME Mary Regina Morrissey (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 21 (Years)	5 COLOR Wh
14 AGE AT LAST BIRTHDAY 20 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE Watertown Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED
9 OCCUPATION Machinist	19 OCCUPATION Stenographer
10 BIRTHPLACE Spring Hill (City or town) Nova Scotia (State or country)	20 BIRTHPLACE Natick (City or town) Mass (State or country)
11 NAME OF FATHER Martin Roach	21 NAME OF FATHER Thomas C Morrissey
12 MAIDEN NAME OF MOTHER Priscilla Beagon (Priscilla)	22 MAIDEN NAME OF MOTHER Regina Hann

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 24th day of July 1922

Certificate issued August 23 1922 (Month) (Day) (Year) by Chas L Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Southboro (Name of city or town) on August 28, 1922 (Month) (Day) (Year)

Name James F. Conrad Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage..... (Month) (Day) (Year)

Registered No.....

Intention No.....

GROOM	BRIDE
3 FULL NAME: Anguss. Delarda	13 FULL NAME: Desolina Rigoli (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: South borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Sing G
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Sing G
9 OCCUPATION: Farmer	19 OCCUPATION: Shoe worker
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: London, England (City or town) (State or country)
11 NAME OF FATHER: Charles Delarda	21 NAME OF FATHER: Joannes Rigoli
12 MAIDEN NAME OF MOTHER: Louisa Buscon	22 MAIDEN NAME OF MOTHER: Luigia Legati

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 24th day of August 1922

Certificate issued August 30 1922 (Month) (Day) (Year) by Chas L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY, that I joined the above-named persons in marriage at No. St Anna's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Marlboro Mass (Name of city or town) September 24 1922 (Month) (Day) (Year)

Name Rev. Antonio Di Carolis Official station R. C. Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 14 N. Bennett St. St., City or town of Boston Mass.

25 Certificate received by city or town clerk..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Charles Genari	13 FULL NAME: Julia Alberti (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: Wh
14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Waltham Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Sing'l
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Sing'l
9 OCCUPATION: Gardener	19 OCCUPATION: Mill Operative
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: Italy (City or town) (State or country)
11 NAME OF FATHER: Luigi Genari	21 NAME OF FATHER: Giuseppe Alberti
12 MAIDEN NAME OF MOTHER: Carzi Rabini	22 MAIDEN NAME OF MOTHER: Antonia Nicelli

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 24th day of August 1922

Certificate issued August (Month) 31 (Day) 1922 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anna's Church, St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on September 24 1922 (Month) (Day) (Year)

Name Rev. Antonio Di Carolis Official station R. C. Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 14 N. Bennett St St., City or town of Boston Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year)

(City or town making return.)

Registered No.

Intention No.

GROOM		BRIDE	
3 FULL NAME John Henry Maley		13 FULL NAME Elizabeth Margaret Byrne (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 30 (Years)	5 COLOR White	14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass		16 RESIDENCE AT TIME OF MARRIAGE Marlborough, Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Clerk		19 OCCUPATION Stenographer	
10 BIRTHPLACE Southborough, Mass (City or town) (State or country)		20 BIRTHPLACE Marlborough, Mass (City or town) (State or country)	
11 NAME OF FATHER Michael R Maley		21 NAME OF FATHER John F Byrne	
12 MAIDEN NAME OF MOTHER Johanna F Brenn		22 MAIDEN NAME OF MOTHER Margaret Ann Kellaher	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this Thirteenth day of September 1922

Certificate issued September 20 1922 by C. H. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 17 Washington St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward (Name of city or town) on Sept. 24 1922 (Month) (Day) (Year)

Name Thomas B. Lowney Official station Catholic Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 17 Washington St., City or town of Framingham

25 Certificate received by city or town clerk Sept. 26 1922 (Month) (Day) (Year)

C. H. Fairbanks
CITY OR TOWN CLERK OR REGISTRAR

R-103

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

1-'20. 10,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE
City or town ..... Registered No. .....

2 DATE OF MARRIAGE ..... Return of city or town of .....
(Month) (Day) (Year)

GROOM		BRIDE	
3 FULL NAME: John Tobin		13 FULL NAME: Catherine F Burke (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 33 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 28 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Shoe Cutter		19 OCCUPATION: Housekeeper	
10 BIRTHPLACE: Marlborough (City or town) Mass (State or country)		20 BIRTHPLACE: Southborough (City or town) Mass (State or country)	
11 NAME OF FATHER: Thomas Tobin		21 NAME OF FATHER: James J Burke	
12 MAIDEN NAME OF MOTHER: Mary Sweeney		22 MAIDEN NAME OF MOTHER: Mary Donahue	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (or town) of Southborough according to law, this 23rd day of September 1922

Certificate issued Sept 30 1922 by Chas L. Fairbanks REGISTRAR

24 To the ..... (City or town) Clerk of .....

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued ..... (Month) (Day) (Year)

by ..... (Name of clerk) Clerk of the city (or town) of ..... Massachusetts, and that the persons named therein were joined in marriage by me, at No. St. Anne's Church, St., (If marriage was solemnized in a church, give its NAME instead of street and number)

5 Ward in the city (or town) of Southboro on October 2 1922

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro Mass.

25 Received by city or town clerk ..... 19 ..... REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Edward McMullen	13 FULL NAME: Catherine Mary O'Halloran (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 39 (Years)	14 AGE AT LAST BIRTHDAY: 27 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Coachman	19 OCCUPATION: Waitress
10 BIRTHPLACE: Ireland (City or town) (State or country)	20 BIRTHPLACE: Ireland (City or town) (State or country)
11 NAME OF FATHER: Edward McMullen	21 NAME OF FATHER: Thomas O'Halloran
12 MAIDEN NAME OF MOTHER: Mary Duggan	22 MAIDEN NAME OF MOTHER: Fannie Lacey

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this tenth day of October 1922

Certificate issued October (Month) 16 (Day) 1922 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anne's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on October (Month) 17 (Day) 1922 (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) .....

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Donald R Hunt	13 FULL NAME Ellen L Thompson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 27 (Years)	5 COLOR wh
14 AGE AT LAST BIRTHDAY 21 (Years)	15 COLOR wh
6 RESIDENCE AT TIME OF MARRIAGE South Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE Framingham Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Orchardist	19 OCCUPATION At home
10 BIRTHPLACE Newton (City or town) Mass (State or country)	20 BIRTHPLACE Framingham (City or town) Mass (State or country)
11 NAME OF FATHER William O Hunt	21 NAME OF FATHER Alfred M Thompson
12 MAIDEN NAME OF MOTHER Mae E Felch	22 MAIDEN NAME OF MOTHER Elizabeth M Lord

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town)

of South Framingham (Name of city or town), according to law, this 14th day of September 1922

Certificate issued Sept 25 - 1922 (Month) (Day) (Year) by B H Fessenden (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No 9 Forrestdale St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Waltham (Name of city or town) on October (Month) 18 (Day) 1922 (Year)

Name William A Knifton Official station Minister of the gospel. (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 9, Vernon St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Joseph D. Fantoni	13 FULL NAME Eva Elizabeth Mitchell (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 30 (Years)	14 AGE AT LAST BIRTHDAY 25 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
8 SINGLE, WIDOWED, OR DIVORCED Single	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION machinist	19 OCCUPATION Clerk
10 BIRTHPLACE Italy (City or town) (State or country)	20 BIRTHPLACE Southborough Mass (City or town) (State or country)
11 NAME OF FATHER Andrea Fantoni	21 NAME OF FATHER Louis Mitchell
12 MAIDEN NAME OF MOTHER Enricetta Binda	22 MAIDEN NAME OF MOTHER Marcella Cardain

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 25th day of May 19 22

Certificate issued May 31 1922 (Month) (Day) (Year) by Maryanne M. Fantoni Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No St Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southboro (Name of city or town) on October (Month) 25 (Day) 1922 (Year)

Name James P Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Southboro St., City or town of Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

..... (City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Thomas Frederick Doran	13 FULL NAME Mary Elizabeth McLaughlin (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 34 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Framingham, Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 2nd	8 SINGLE, WIDOWED, OR DIVORCED Widowed
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Electrician	19 OCCUPATION Stenography
10 BIRTHPLACE Framingham Mass (City or town) (State or country)	20 BIRTHPLACE Boston Mass (City or town) (State or country)
11 NAME OF FATHER James Doran	21 NAME OF FATHER Michael McLaughlin
12 MAIDEN NAME OF MOTHER Mary McLaughlin	22 MAIDEN NAME OF MOTHER Catherine Delaney

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 29th day of October 1922

Certificate issued November (Month) 4 (Day) 1922 (Year) by Marjorie M. Fairbanks (City or Town Clerk or Registrar) Asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No St. Anne's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on November (Month) 4 (Day), 1922 (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro, Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town) — (City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year) — Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME: George John Gebhart	13 FULL NAME: Mary Alice Margaret Dubois (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: 14 Highland St Lowell Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Mechanic	19 OCCUPATION: At home
10 BIRTHPLACE: Southborough Mass (City or town) (State or country)	20 BIRTHPLACE: Worcester Mass (City or town) (State or country)
11 NAME OF FATHER: Martin Gebhart	21 NAME OF FATHER: Joseph G. Dubois
12 MAIDEN NAME OF MOTHER: Victoria Schemnacky	22 MAIDEN NAME OF MOTHER: Rose Anna Binary

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town), according to law, this 25th day of October, 192-

Certificate issued October 31 1922 (Month) (Day) (Year) by: Chas L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Notre Dame de Lourdes Church (If marriage was solemnized in a church, give its NAME instead of street and number) Ward(s) Lowell Mass. (Name of city or town) on November 7th (Month) (Day) 1922 (Year)

Name Lucien J. Brassard, OMI Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 716 Meddlesex St St., City or town of Lowell, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

Southborough (City or town making return)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME: Earle A Gould	13 FULL NAME: Nellie M. (Ramey) Webber (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 31 (Years)	14 AGE AT LAST BIRTHDAY: 31 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): Second
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Widow
9 OCCUPATION: Printer	19 OCCUPATION: Nurse
10 BIRTHPLACE: Southborough (City or town) Mass. (State or country)	20 BIRTHPLACE: Bridgewater (City or town) Nova Scotia (State or country)
11 NAME OF FATHER: William A Gould	21 NAME OF FATHER: Artemus Ramey
12 MAIDEN NAME OF MOTHER: Carrie M Southwick	22 MAIDEN NAME OF MOTHER: Deborah Garber

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this nineteenth day of November 1922

Certificate issued November 24 1922 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 26 Walnut St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward — (Name of city or town) Wellesley on Nov. (Month) 25 (Day) 1922 (Year)

Name Joseph B. Seabury Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 26 Wellesley Walnut St., City or town of Wellesley

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-10

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE ..... (City or Town)

City or Town ..... 2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....
(Do not enter name of village or section of city or town)

Intention No. .....

GROOM	BRIDE
3 FULL NAME: James Allen Harris	13 FULL NAME: Fannie Mara Grant (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 30 (Years)	14 AGE AT LAST BIRTHDAY: 26 (Years)
5 COLOR: Wh.	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Berlin Falls Maine
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Sing'l	18 SINGLE, WIDOWED, OR DIVORCED: Sing'l
9 OCCUPATION: Forester	19 OCCUPATION: Housekeeper
10 BIRTHPLACE: South Borough - Mass (City or town) (State or country)	20 BIRTHPLACE: Berlin Falls Maine (City or town) (State or country)
11 NAME OF FATHER: James T. Harris	21 NAME OF FATHER: Thomas A Grant
12 MAIDEN NAME OF MOTHER: Ada L. Harvey	22 MAIDEN NAME OF MOTHER: Lou Eldora Getchell

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this twenty-ninth day of November 1922

Certificate issued December 5 1922 (Month) (Day) (Year) by Chas. L. Fairbanks (City or ~~Town~~ Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Bay water St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on December 6, 1922 (Month) (Day) (Year)

Name William F. Dunleavy Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 39 St. Andrew Rd. St., City or town of Boston

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-'20. 20,000.

FORM R-101

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE ..... (City or Town)

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. ..... Intention No. .....

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

GROOM	BRIDE
3 FULL NAME: Richard Lincoln	13 FULL NAME: Mabelle H Bartlett (Bean) (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 34 (Years)	14 AGE AT LAST BIRTHDAY: 36 (Years)
5 COLOR: Wh	15 COLOR: Whi-
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Hudson Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): Second
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Divorced
9 OCCUPATION: Asst. Supt.	19 OCCUPATION: At Home
10 BIRTHPLACE: Hesperus (City or town) Larimer County - Colorado (State or country)	20 BIRTHPLACE: Hudson (City or town) Mass. (State or country)
11 NAME OF FATHER: Richard M Lincoln	21 NAME OF FATHER: Hiram P Bean
12 MAIDEN NAME OF MOTHER: Mabel V Murray	22 MAIDEN NAME OF MOTHER: Ella M Cutting

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 26th day of December 1922

Certificate issued December (Month) 31 (Day) 1922 (Year) by Chas L Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Latisquama Road St. (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) Southborough on January 1. 1923. (Month) (Day) (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 8 Main St., City or town of Southborough. Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

10-20. 20,000.

FORM R-101

MARGIN RESERVED FOR BINDING

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10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. 2 Intention No. .....

GROOM	BRIDE
3 FULL NAME John Truchinski	13 FULL NAME Anna Isabelle Nee (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 22 (Years)	5 COLOR Wh.
14 AGE AT LAST BIRTHDAY 27 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass.	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Cook's Helper	19 OCCUPATION Waitress
10 BIRTHPLACE Russia (City or town) (State or country)	20 BIRTHPLACE Maynard Mass (City or town) (State or country)
11 NAME OF FATHER Frank Truchinski	21 NAME OF FATHER Bartley Nee
12 MAIDEN NAME OF MOTHER Josephine Gorsky	22 MAIDEN NAME OF MOTHER Mary Ann Lydon

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 28th day of December 19....

Certificate issued Dec January 3 1923 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 5 Bridge St., Church (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... Maynard (Name of city or town) on Jan 3, 1923 (Month) (Day) (Year)

Name Edward F. Loughlin Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Percival St St., City or town of Maynard

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage (Month) (Day) (Year) Registered No. 3 Intention No.

GROOM		BRIDE	
3 FULL NAME Hugh Joseph McDonald		13 FULL NAME Marjorie May Fairbanks (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 28 (Years)	5 COLOR White	14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass		16 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Dentist		19 OCCUPATION Clerk	
10 BIRTHPLACE Southborough (City or town)	Mass (State or country)	20 BIRTHPLACE Southborough (City or town)	Mass (State or country)
11 NAME OF FATHER Thomas A. McDonald		21 NAME OF FATHER Charles L. Fairbanks	
12 MAIDEN NAME OF MOTHER Mary Crowley		22 MAIDEN NAME OF MOTHER Marie E. H. Bouthillet	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this eighth day of January 1923

Certificate issued January (Month) 14 (Day) 1923 (Year) by Marjorie M Fairbanks (City or Town Clerk or Registrar) asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anns Church St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward (Name of city or town) Southboro on January (Month) 15 (Day) 1923 (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro, mass.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 12

Intention No. .....

GROOM		BRIDE	
3 FULL NAME	Fred G. Slawson Jr.	13 FULL NAME (If a widow or divorced, give also maiden name)	Evelyn G Willard
4 AGE AT LAST BIRTHDAY (Years)	23	14 AGE AT LAST BIRTHDAY (Years)	22
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Store Manager	19 OCCUPATION	at home
10 BIRTHPLACE (City or town) (State or country)	Jamaica Plain Mass	20 BIRTHPLACE (City or town) (State or country)	Berlin Mass
11 NAME OF FATHER	Fred G. Slawson	21 NAME OF FATHER	Albert A Willard
12 MAIDEN NAME OF MOTHER	Caroline Wolf	22 MAIDEN NAME OF MOTHER	Cora Cutler

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 14th day of February 1923.

Certificate issued February (Month) 19th (Day) 1923 (Year) by C. P. Fairbanks (~~City or~~ Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Main St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on February (Month) 27 (Day) 1923 (Year).

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro

25 Certificate received by city or town clerk Feb 28 1923 (Month) (Day) (Year) C. P. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. 4 Intention No. .....

GROOM	BRIDE
3 FULL NAME Hiram Conant Mowry	13 FULL NAME Ruth Crawford Pierce (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 27. (Years)	14 AGE AT LAST BIRTHDAY 19 (Years)
5 COLOR Wh.	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Hollis tin Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first
8 SINGLE, WIDOWED, OR DIVORCED Single	18 SINGLE, WIDOWED, OR DIVORCED Single.
9 OCCUPATION Chef	19 OCCUPATION At home
10 BIRTHPLACE Central Falls (City or town) R I. (State or country)	20 BIRTHPLACE Boston (City or town) Mass (State or country)
11 NAME OF FATHER William Harrison Mowry	21 NAME OF FATHER Frank Pierce
12 MAIDEN NAME OF MOTHER Florence Reed Conant	22 MAIDEN NAME OF MOTHER Louise Martinde Spooner

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the ~~City~~ Town (City or town) of Southborough (Name of city or town) according to law, this Eleventh day of March 1923.

Certificate issued March (Month) 16th (Day) 1923 (Year) by Chas. P. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. West Wednesday Road St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on ..... (Month) (Day) 25- (Year) 1923

Name Rev Geo Edward Brown Official station Congregational Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ....., St., City or town of .....

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage (Month) (Day) (Year) Registered No. 5

Intention No.

GROOM		BRIDE	
3 FULL NAME: Laurence S. Meserve		13 FULL NAME: Margaret Hilda Cody (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 33 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 26 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): Second	8 SINGLE, WIDOWED, OR DIVORCED: Widower	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Chauffeur		19 OCCUPATION: Waitress	
10 BIRTHPLACE: Framingham (City or town) Mass (State or country)		20 BIRTHPLACE: Bartlett (City or town) N.H. (State or country)	
11 NAME OF FATHER: Charles O Meserve		21 NAME OF FATHER: John Cody	
12 MAIDEN NAME OF MOTHER: Bertha O'Leary		22 MAIDEN NAME OF MOTHER: Mary Roy	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough Mass (Name of city or town) according to law, this 28th day of March 1923.

Certificate issued April 3 - 1923 (Month) (Day) (Year) by Chas L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anne's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward (Name of city or town) on April 4 1923 (Month) (Day) (Year)

Name James E. Coffman Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Breton Road St., City or town of Southboro, Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 6

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Patrick Henry Manning	13 FULL NAME: Bridget Mary Doyle (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 33 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: R.R. Conductor	19 OCCUPATION: Housework
10 BIRTHPLACE: Hopkinton (City or town) Mass (State or country)	20 BIRTHPLACE: Ireland (City or town) (State or country)
11 NAME OF FATHER: Thomas Manning	21 NAME OF FATHER: James Doyle
12 MAIDEN NAME OF MOTHER: Esther May Healey	22 MAIDEN NAME OF MOTHER: Hannah Kane

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this ninth day of April 1923

Certificate issued April 24 1923 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anns Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on April (Month) 19, (Day) 1923 (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE City or Town Southborough (Do not enter name of village or section of city or town) (City or Town)

2 Date of Marriage May 14 1923 (Month) (Day) (Year) Registered No. 7 Intention No.

GROOM	BRIDE
3 FULL NAME Charles Herbert Holmes	13 FULL NAME Hazel Rowell (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 37 (Years)	14 AGE AT LAST BIRTHDAY 28 (Years)
5 COLOR White	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE South Borough Mass
7 NUMBER OF MARRIAGE Second (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE first (1st, 2d, 3d, etc.)
8 SINGLE, WIDOWED, OR DIVORCED Widowed	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Electrician	19 OCCUPATION At home
10 BIRTHPLACE Boston Mass (City or town) (State or country)	20 BIRTHPLACE Albany Vt (City or town) (State or country)
11 NAME OF FATHER George Holmes	21 NAME OF FATHER Edward E Rowell
12 MAIDEN NAME OF MOTHER Charlotte P Beaton	22 MAIDEN NAME OF MOTHER Inez E Thompson

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 2nd day of May 1923

Certificate issued May (Month) 10th (Day) 1923 (Year) by Chas L Frankard (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Residence of Samuel Blake, Parkerville Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

2 Ward Southborough (Name of city or town) on May (Month) 14th (Day) 1923 (Year)

Name Norman Milligan Gurney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 185 Palfrey St., City or town of Watertown, Mass.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Southborough (City or Town)
(Do not enter name of village or section of city or town)

2 Date of Marriage: (Month) (Day) (Year)

Registered No. 8

Intention No.

GROOM	BRIDE
3 FULL NAME: Edwin Stewart Freeman	13 FULL NAME: Augusta Brown (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 38 (Years)	14 AGE AT LAST BIRTHDAY: 20 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Boston Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Chief Statistician	19 OCCUPATION: Secretary
10 BIRTHPLACE: Brooklyn (City or town) NY (State or country)	20 BIRTHPLACE: Berlin (City or town) Mass (State or country)
11 NAME OF FATHER: John Cromell Freeman	21 NAME OF FATHER: Horace S Brown
12 MAIDEN NAME OF MOTHER: Lillian Augusta Bostol	22 MAIDEN NAME OF MOTHER: Dale C Barney

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fifth day of May 1923.

Certificate issued May 11 1923 (Month) (Day) (Year) by Eva L. Fairbanks (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. Alleton Congregational Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

25 Ward Boston (Name of city or town) on May (Month) 19 (Day) 1923 (Year)

Name Manley S. Allbright Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 31 Quint Ave, St., City or town of Boston.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-102

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. NO CERTIFICATE WITH ERASURES OR ALTERATIONS WILL BE ACCEPTED.

MARGIN RESERVED FOR BINDING

11-18. 30,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF MARRIAGE

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

This form is to be used by clerks of cities and towns for making a return to the Secretary of the Commonwealth of a marriage of a resident of his city or town which was solemnized elsewhere.

Registered No. 9

1 Place of Marriage: South Boroughs

2 Date of Marriage: May 20 - 23 (Month) (Day) (Year)

Return of city or town of

GROOM		BRIDE	
3 FULL NAME	Percy T. Sprague.	13 FULL NAME (If a widow or divorced, give also maiden name)	Isabel P. (Howes) Towle.
4 AGE AT LAST BIRTHDAY (Years)	42.	14 AGE AT LAST BIRTHDAY (Years)	41.
5 COLOR	White.	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE (City or town)	Watertown,	(State or country)	Mass
		16 RESIDENCE AT TIME OF MARRIAGE (City or town)	Sudbury,
		(State or country)	Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	1st.	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	2nd.
8 SINGLE, WIDOWED, OR DIVORCED	Single.	18 SINGLE, WIDOWED, OR DIVORCED	Divorced.
9 OCCUPATION	Real Estate Dealer.	19 OCCUPATION	Decorator.
10 BIRTHPLACE (City or town)	Great Bend.	(State or country)	Kansas.
		20 BIRTHPLACE (City or town)	Portland,
		(State or country)	Maine.
11 NAME OF FATHER	Chester Sprague.	21 NAME OF FATHER	George H. Howes.
12 MAIDEN NAME OF MOTHER	Elvira A. Davis.	22 MAIDEN NAME OF MOTHER	Ann L. Brown.

23 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Pilgrim Congregational St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward, Southborough (Name of city or town) on May (Month) 20, (Day) 1923 (Year)

Name John J. Lockett Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough.

24 Certificate received by registrar May (Month) 21 (Day) 23 (Year)

REGISTRAR

(City or town)

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22, 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 10

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Primo Raffi		13 FULL NAME: Louisa Lucy Ramelli (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 42 (Years)	5 COLOR: Wh.	14 AGE AT LAST BIRTHDAY: 37 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: 59 Lowell St. Somerville Mass		16 RESIDENCE AT TIME OF MARRIAGE: School St. Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Shoemaker		19 OCCUPATION: Domestic	
10 BIRTHPLACE: Italy (City or town) (State or country)		20 BIRTHPLACE: Boston Mass (City or town) (State or country)	
11 NAME OF FATHER: Domenic Raffi		21 NAME OF FATHER: Lazzarro Ramelli	
12 MAIDEN NAME OF MOTHER: Annunciata Fiorani		22 MAIDEN NAME OF MOTHER: Guidetta Bonilla	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 4th day of June 1923

Certificate issued June (Month) 15 (Day) 1923 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on June (Month) 30 (Day) 1923 (Year)

Name James P Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) .....

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 11

Intention No. .....

GROOM	BRIDE
3 FULL NAME: James Fairbairn Telfer	13 FULL NAME: Florence Mary Dupuis (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 25 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.	16 RESIDENCE AT TIME OF MARRIAGE: Framingham Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Shipper	19 OCCUPATION: Table worker
10 BIRTHPLACE: Scotland (City or town) (State or country)	20 BIRTHPLACE: Framingham Mass (City or town) (State or country)
11 NAME OF FATHER: James J Telfer	21 NAME OF FATHER: Francis Dupuis
12 MAIDEN NAME OF MOTHER: Eleana Turnbull	22 MAIDEN NAME OF MOTHER: Anna Bettey

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this sixteenth day of July 1923

Certificate issued July 21 1923 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 30 Clinton St., (If marriage was solemnized in a church, give its NAME instead of street and number) So Framingham (Name of city or town) on July 22nd 1923 (Month) (Day) (Year)

Name J. F. Heffernan Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 30 Clinton St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 13

Intention No. .....

GROOM	BRIDE
3 FULL NAME: William E. O'Connell	13 FULL NAME: Adrienne Marshall (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 41 (Years)	14 AGE AT LAST BIRTHDAY: 43 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Westborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): First	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): third
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: widowed
9 OCCUPATION: Shoemaker	19 OCCUPATION: Shoeworker
10 BIRTHPLACE: Southborough (City or town) Mass (State or country)	20 BIRTHPLACE: Marlborough (City or town) Mass (State or country)
11 NAME OF FATHER: David O'Connell	21 NAME OF FATHER: Narcisse Sasseville
12 MAIDEN NAME OF MOTHER: Johannah Toomey	22 MAIDEN NAME OF MOTHER: Malvina Gould

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this twelfth day of August 1923

Certificate issued August (Month) 17 (Day) 1923 (Year) by Marjorie F. McDonald (City or Town Clerk or Registrar) Asst.

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Luke's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Westboro (Name of city or town) on Aug. (Month) 25 (Day) 1923 (Year)

Name J. E. McGann Official station R. C. Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ....., Main St. St., City or town of Westboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

Groom Charles H. Thompson

Bride Blanche Grace Bennett

Residence of Groom Fayville Mass

" Bride " "

Age of Groom 68 Years

" Bride 50 "

Color of Groom White

" Bride "

Occupation of Groom Cabinet Maker

" Bride Registered Nurse

Birthplace of Groom Westhersfield Vt

" Bride St Johns N.B.

No. of Marriage of Groom 3rd

" Bride First

Groom widowed or Divorced Widowed

Bride " " "

Intention filed August 25, 1923

By whom Married* C. B. Eisler

Residence Claremont

Official Station Clergyman

Date of Marriage August 30, 1923

Place Claremont N.H.

*Clergyman or Justice of the Peace 6052

(Record continued over)

JS

(Record continued.)

GROOM'S FATHER AND MOTHER

Father's Name William E. Thompson

" Residence .....

" Age* 74 Color .....

" Occupation .....

" Birthplace Newport N.H.

Mother's Name Mary B. Hall

" Residence .....

" Age* 72 Color .....

" Occupation .....

" Birthplace Weathersfield Vt.

BRIDE'S FATHER AND MOTHER

Father's Name Edward B. Bennett

" Residence .....

" Age* 69 Color .....

" Occupation .....

" Birthplace Horton, Nova Scotia

Mother's Name Rosanna Pelton

" Residence .....

" Age* 78 Color .....

" Occupation .....

" Birthplace Horton N.S.

THE STATE OF NEW HAMPSHIRE

I hereby certify that the above marriage record is correct to the best of my knowledge and belief.

Hiram G. Sherman

Clerk of Claremont N.H.

Date Sept. 1. 1923

*If deceased, give age at death.

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Framingham (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year)

(City or town making return.) Registered No. 15

Intention No.

GROOM	BRIDE
3 FULL NAME Arthur R Taylor	13 FULL NAME Ada Pearsl (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 25 (Years)	5 COLOR Wh
14 AGE AT LAST BIRTHDAY 22 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED singl
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED singl.
9 OCCUPATION Milk Plant Chemist	19 OCCUPATION At home
10 BIRTHPLACE Framingham (City or town) Mass (State or country)	20 BIRTHPLACE Lost Leigh (City or town) England (State or country)
11 NAME OF FATHER Howard M Taylor	21 NAME OF FATHER John B Pearsl
12 MAIDEN NAME OF MOTHER Lucy Baker	22 MAIDEN NAME OF MOTHER Lillian Mary Tucker

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 24th day of August 1923.

Certificate issued August (Month) 29 (Day) 1923 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mark's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) — Ward Southborough (Name of city or town) on September 3 (Month) (Day), 1923 (Year)

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Mark's Rectory St., City or town of Southborough, Mass

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 16

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: William Edward Wentworth		13 FULL NAME: Gladys Miller (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 35 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: 8 West main St. Marlborough		16 RESIDENCE AT TIME OF MARRIAGE: Southborough	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): Second	8 SINGLE, WIDOWED, OR DIVORCED: Divorced (Copy of Decree on file)	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Store Manager		19 OCCUPATION: at home	
10 BIRTHPLACE: Webster (City or town)	Mass (State or country)	20 BIRTHPLACE: Southborough (City or town)	Mass (State or country)
11 NAME OF FATHER: Adolph Wentworth		21 NAME OF FATHER: George W Miller	
12 MAIDEN NAME OF MOTHER: Mary Goodnow		22 MAIDEN NAME OF MOTHER: Bertha Smith	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of August 1923

Certificate issued August 28 1923 (Month) (Day) (Year) by Chas L. Fairbanks (City or Town Clerk or Registrar) Town Clerk

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Turnpike St. (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southboro (Name of city or town) on Sept (Month) 3, (Day) 1923, (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year)

(City or town making return.)

Registered No. 87

Intention No.

GROOM	BRIDE
3 FULL NAME Frank J Salmon	13 FULL NAME Mary Agnes McNulty (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 50 (Years)	5 COLOR Wh.
14 AGE AT LAST BIRTHDAY 40 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough	16 RESIDENCE AT TIME OF MARRIAGE Forest Hills – Boston Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) Second	8 SINGLE, WIDOWED, OR DIVORCED widowed
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Watchman	19 OCCUPATION Designer
10 BIRTHPLACE Southborough (City or town) Mass (State or country)	20 BIRTHPLACE Boston (City or town) Mass (State or country)
11 NAME OF FATHER Patrick Salmon	21 NAME OF FATHER Patrick J McNulty
12 MAIDEN NAME OF MOTHER Katherine Burke	22 MAIDEN NAME OF MOTHER Bridget Corliss

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fifteenth day of August 1923

Certificate issued August (Month) 25 (Day) 1923 (Year) by Chas L Fairbank (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Andrews Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Boston (Name of city or town) on Sept (Month) 10, (Day) 1923. (Year)

Name William J Carey Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 40 Walk Hill St., City or town of Boston

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return)

Registered No. 18

Intention No. .....

GROOM	BRIDE
3 FULL NAME: James Denny Geoghegan	13 FULL NAME: Helen Barbara Devett (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	14 AGE AT LAST BIRTHDAY: 26 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Sherborn, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Single	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Farmer	19 OCCUPATION: Clerk
10 BIRTHPLACE: Brighton (City or town) Mass (State or country)	20 BIRTHPLACE: Medfield (City or town) Mass (State or country)
11 NAME OF FATHER: Lawrence Geoghegan	21 NAME OF FATHER: Thomas Devitt
12 MAIDEN NAME OF MOTHER: Mary Shea	22 MAIDEN NAME OF MOTHER: Margaret Burke

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 27th day of August 1923

Certificate issued September 16 1923 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Patricks Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Natick, Mass. (Name of city or town) on Sept 20 (Month) (Day) 1923 (Year)

Name Fr. J. Delaney Official station Catholic Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 30 East Central St., City or town of Natick, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

2-'22. 50,000.

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 19

Intention No. .....

GROOM	BRIDE
3 FULL NAME Peter Aloysius Delaney	13 FULL NAME Mary Elizabeth Baland (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 27 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 29 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Marlborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Tea Merchant	19 OCCUPATION Telephone operator
10 BIRTHPLACE Marlborough (City or town), Mass. (State or country)	20 BIRTHPLACE Southborough (City or town), Mass. (State or country)
11 NAME OF FATHER Peter A. Delaney	21 NAME OF FATHER William J. Baland
12 MAIDEN NAME OF MOTHER Honora Raggin	22 MAIDEN NAME OF MOTHER Mary Burke

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this eighth day of October 1923

Certificate issued October (Month) 14, (Day) 1923 (Year) by Marjorie E. McDonald Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Ann's Church (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southboro (Name of city or town) on October (Month) 23 (Day) 1923 (Year)

Name Henry J. McCann Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 30

Intention No. .....

GROOM	BRIDE
3 FULL NAME: John Vincent Finn Jr	13 FULL NAME: Mary Margaret Winn (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 26 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Farmer	19 OCCUPATION: Clerk
10 BIRTHPLACE: Cambridge (City or town) Mass (State or country)	20 BIRTHPLACE: Providence (City or town) RI (State or country)
11 NAME OF FATHER: John V Finn	21 NAME OF FATHER: Frank J Winn
12 MAIDEN NAME OF MOTHER: Angie Chatwin	22 MAIDEN NAME OF MOTHER: Eliza Mulroy

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 24th day of October 1923

Certificate issued November 2, 1923 (Month) (Day) (Year) by Cora L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 17 Washington St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Nov. 4 1923 (Month) (Day) (Year)

Name Thomas F. Lennon Official station Asst. Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 17 Washington St., City or town of Marlboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Methuen, Mass. (Do not enter name of village or section of city or town) — South Borough (City or Town)

2 Date of Marriage November 30. 1923 (Month) (Day) (Year) — Registered No. — Intention No.

GROOM	BRIDE
3 FULL NAME: Harold Elmer Fitzgerald	13 FULL NAME: Lillian Winifred Borgeson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 33 (Years)	14 AGE AT LAST BIRTHDAY: 29 (Years)
5 COLOR: Wh.	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass	16 RESIDENCE AT TIME OF MARRIAGE: South Borough Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Sngle	18 SINGLE, WIDOWED, OR DIVORCED: sngle
9 OCCUPATION: Bond Salesman	19 OCCUPATION: Teacher
10 BIRTHPLACE: Island Pond (City or town) Vt. (State or country)	20 BIRTHPLACE: Boston (City or town) Mass (State or country)
11 NAME OF FATHER: Henry E. Fitzgerald	21 NAME OF FATHER: Adolph Borgeson
12 MAIDEN NAME OF MOTHER: Ethel G Grant	22 MAIDEN NAME OF MOTHER: Othelia Lundgren

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this Tenth day of November 1923.

Certificate issued November (Month) 15 (Day) 1923 (Year) by Ann L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. All Saints Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) in Ward 2 Ward Methuen (Name of city or town) on Nov. 30 - 1923 (Month) (Day) (Year)

Name Gilbert V. Russell Official station Clergyman - (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. All Saints Place St. City or town of Methuen - Mass -

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

Southborough
(City or town making return.)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 1

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Norman Brunell		13 FULL NAME: Florence Gladys Hilton (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 26 (Years)	5 COLOR: Wh.	14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass		16 RESIDENCE AT TIME OF MARRIAGE: Newport R I.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Teacher		19 OCCUPATION: Stenographer	
10 BIRTHPLACE: Alleghany (City or town)	N Y (State or country)	20 BIRTHPLACE: Newport (City or town)	R I (State or country)
11 NAME OF FATHER: Charles Brunell		21 NAME OF FATHER: Samuel A Hilton	
12 MAIDEN NAME OF MOTHER: Minnie M Drew		22 MAIDEN NAME OF MOTHER: Rose Amelia Geraghty	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this thirtieth day of January 1924

Certificate issued February (Month) 5 (Day) 1924 (Year) by Chas. L. Fairbanks (City or ~~Town~~ Clerk or ~~Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 23 Church St. (If marriage was solemnized in a church, give its NAME instead of street and number) St. Mary's Rectory

Ward ..... (Name of city or town) Mansfield on February (Month) 16 (Day) 1924 (Year)

Name Hugh B. Harrold Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 23 Church St., City or town of Mansfield

25 Certificate received by city or town clerk Feby (Month) 19 (Day) 1924 (Year) C. L. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Worcester (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage (Month) (Day) (Year)

Registered No. 2

Intention No.

GROOM	BRIDE
3 FULL NAME Waldo N Richardson	13 FULL NAME Alice Sophia Harding (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 33 (Years)	5 COLOR Wh.
14 AGE AT LAST BIRTHDAY 22 (Years)	15 COLOR Wh.
6 RESIDENCE AT TIME OF MARRIAGE Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE South Borough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED Sing'l
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Sing'l
9 OCCUPATION Commercial Manager	19 OCCUPATION Dennison Co.
10 BIRTHPLACE Waltham Mass. (City or town) (State or country)	20 BIRTHPLACE Brighton Mass. (City or town) (State or country)
11 NAME OF FATHER Henry N Richardson	21 NAME OF FATHER Charles Philip Harding
12 MAIDEN NAME OF MOTHER Nellie E Hicks	22 MAIDEN NAME OF MOTHER Ella S. Dix

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this 25th day of February 1924

Certificate issued March 5 - 1924 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 661 Main St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Worcester (Name of city or town) on March 26 1924 (Month) (Day) (Year)

Name William R. McInnes Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 11 St Elmo Rd St., City or town of Worcester

25 Certificate received by city or town clerk March 29 1924 (Month) (Day) (Year)

Chas. L. Fairbanks
CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 3

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Leo Foley		13 FULL NAME: Marion Veronica Mahoney (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 35 (Years)	5 COLOR: Wh.	14 AGE AT LAST BIRTHDAY: 24 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Natick Mass		16 RESIDENCE AT TIME OF MARRIAGE: Southborough	
7 NUMBER OF MARRIAGE: second (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: widower	17 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Chauffeur		19 OCCUPATION: At Home	
10 BIRTHPLACE: Wayland (City or town) Mass (State or country)		20 BIRTHPLACE: Southborough (City or town) Mass (State or country)	
11 NAME OF FATHER: Dennis Foley		21 NAME OF FATHER: Daniel F Mahoney	
12 MAIDEN NAME OF MOTHER: Ann Matthews		22 MAIDEN NAME OF MOTHER: Mary Leahy	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this twenty-th day of April 1924

Certificate issued April 14 - 1924 (Month) (Day) (Year) by Ellen L Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on April 21 1924 (Month) (Day) (Year)

Name James J Coughlan Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 5

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Peter Esalbettini	13 FULL NAME: Guiseppina Piccicuto (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 31 (Years)	5 COLOR: Wh.
	14 AGE AT LAST BIRTHDAY: 20 (Years)
	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE: 24 Granite St., Fitchburg, Mass.
7 NUMBER OF MARRIAGE: second (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: widowed
	17 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)
	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Laborer	19 OCCUPATION: Factory worker
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: Italy (City or town) (State or country)
11 NAME OF FATHER: Antonio Esalbettini	21 NAME OF FATHER: Vincenzo Piccicuto
12 MAIDEN NAME OF MOTHER: Philomena Ragaini	22 MAIDEN NAME OF MOTHER: Vincenza Piccicuto

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this eighth day of April 1924.

Certificate issued April (Month) 15 (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anthony's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... Fitchburg, Mass. (Name of city or town), on April (Month) 26 (Day) 1924 (Year)

Name Angelo Carpinella Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 50 Salem St., City or town of Fitchburg, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22, 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

Divorce decree filed with Town Clerk Southborough

The Commonwealth of Massachusetts
CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 4

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Domine E Lepore	13 FULL NAME: Ada Eva Phillips (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 29 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: Wh	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Clinton Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): second	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: Divorced	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Painter	19 OCCUPATION: Shoe worker
10 BIRTHPLACE: Italy (City or town) (State or country)	20 BIRTHPLACE: Southborough Mass (City or town) (State or country)
11 NAME OF FATHER: Camillo Lepore	21 NAME OF FATHER: John Phillips
12 MAIDEN NAME OF MOTHER: Rocco Sudnilo	22 MAIDEN NAME OF MOTHER: Gladale Ricci

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this fourth day of April 1924

Certificate issued April 9-1924 (Month) (Day) (Year) by Chas. L. Frankard (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 36 Bolton St., (If marriage was solemnized in a church, give its NAME instead of street and number)

2 Ward Marlborough (Name of city or town) on April 26 - 1924 (Month) (Day) (Year)

Name Stanley H. Anderson Official station "Minister of the Gospel" (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 36 Bolton St., City or town of Marlborough, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. 6

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Atkins Hughes King	13 FULL NAME: Priscilla Amelia Schnare (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 22 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 22 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: 8 Barrows St. Allston Boston Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: sing'l
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: sing'l
9 OCCUPATION: Salesman (Automobile)	19 OCCUPATION: At Home
10 BIRTHPLACE: North Truro Mass. (City or town) (State or country)	20 BIRTHPLACE: Marlborough Mass. (City or town) (State or country)
11 NAME OF FATHER: Irving A. King	21 NAME OF FATHER: Robert W. Schnare
12 MAIDEN NAME OF MOTHER: Bessie J Hughes	22 MAIDEN NAME OF MOTHER: Frances B. Leary

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 31st day of May 1924.

Certificate issued June 6 1924 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Woland Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

✓ Ward Southborough (Name of city or town) on June (Month) 7, (Day) 1924 (Year)

Name Robert F. Cheney Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ..... Main St. St., City or town of Southborough, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) .....

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 7

Intention No. .....

GROOM	BRIDE
3 FULL NAME: William Lewis MacKeen	13 FULL NAME: Annie Campbell Johnson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: Wh.
	14 AGE AT LAST BIRTHDAY: 20 (Years)
	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single
	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Druggist	19 OCCUPATION: Stenographer
10 BIRTHPLACE: Milford (City or town) New Jersey (State or country)	20 BIRTHPLACE: Southborough (City or town) Mass (State or country)
11 NAME OF FATHER: Gordon MacKeen	21 NAME OF FATHER: James B. Johnson
12 MAIDEN NAME OF MOTHER: Ethel Morse	22 MAIDEN NAME OF MOTHER: Lexie Campbell

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town)

of Southborough (Name of city or town) according to law, this 21st day of May 1924

Certificate issued May 27 (Month) 1924 (Day) (Year) by Chas L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 131 Pearl St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on June (Month) 8 (Day) 1924 (Year)

Name Theodore B. Ladlow Official station Minister Grace Congregational Church (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 131 Pearl St. St., City or town of Framingham

25 Certificate received by city or town clerk June (Month) 11 (Day) 1924 (Year) C. L. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return.)

1 PLACE OF MARRIAGE

City or Town (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year) Registered No. 4

Intention No.

GROOM		BRIDE	
3 FULL NAME: Victor Rossi		13 FULL NAME: Avis Rhoda Baker (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 25 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: (Fathers permit on file) 16 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: South Borough		16 RESIDENCE AT TIME OF MARRIAGE: Walker St. Marlborough	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Farmer		19 OCCUPATION: Housekeeper	
10 BIRTHPLACE: Italy (City or town) (State or country)		20 BIRTHPLACE: Gilford (City or town) N. H. (State or country)	
11 NAME OF FATHER: Pietro Rossi		21 NAME OF FATHER: Elmer E Baker	
12 MAIDEN NAME OF MOTHER: Angelina Maldidi		22 MAIDEN NAME OF MOTHER: Mahala D Emerson	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this 27th day of June 1924

Certificate issued June 14 - 1924 (Month) (Day) (Year) by Chas. P. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Rectory, Boston Rd St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward South boro (Name of city or town) on June (Month) 16 (Day) 1924 (Year)

Name James P Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro Mass

25 Certificate received by city or town clerk (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 9

Intention No. .....

GROOM		BRIDE	
3 FULL NAME Franklin Goodhue Woodward		13 FULL NAME Helen Beatrice Rathbun (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 22 (Years)	5 COLOR wh	14 AGE AT LAST BIRTHDAY 22 (Years)	15 COLOR wh
6 RESIDENCE AT TIME OF MARRIAGE Southborough Mass		16 RESIDENCE AT TIME OF MARRIAGE Marlborough Mass.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Bank Clerk		19 OCCUPATION School Teacher	
10 BIRTHPLACE Marlborough Mass. (City or town) (State or country)		20 BIRTHPLACE Marlborough Mass (City or town) (State or country)	
11 NAME OF FATHER John A Woodward		21 NAME OF FATHER George Rathbun	
12 MAIDEN NAME OF MOTHER Nellie May Jones		22 MAIDEN NAME OF MOTHER Susan Gordy	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this tenth day of July 1924

Certificate issued July 17 1924 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 64 West Main St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on July (Month) 19 (Day) 1924 (Year)

Name S. James Cahir Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 114 Newton St. St., City or town of Marlboro, Mass.,

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town Brockton (Do not enter name of village or section of city or town)

2 Date of Marriage July 16. 1924 (Month) (Day) (Year) — (City or town making return.) Registered No. 16 — Intention No.

GROOM	BRIDE
3 FULL NAME: John Coyle Welch	13 FULL NAME: Mabel Isabel Christolon (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 28 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: Wh.	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	16 RESIDENCE AT TIME OF MARRIAGE: Brockton Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Salesman	19 OCCUPATION: Artist
10 BIRTHPLACE: Southborough Mass (City or town) (State or country)	20 BIRTHPLACE: Kentville Nova Scotia (City or town) (State or country)
11 NAME OF FATHER: John E Welch	21 NAME OF FATHER: William G Christolon
12 MAIDEN NAME OF MOTHER: Rosella Coyle	22 MAIDEN NAME OF MOTHER: Harriet Kelley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fourteenth day of July 1924

Certificate issued July 19 1924 (Month) (Day) (Year) by Chas L. Sumbardo (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 70 Byron Ave St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Brockton (Name of city or town) on July 16. 1924 (Month) (Day) (Year)

Name Edward N. Gibson Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 70, Byron Ave. St., City or town of Brockton Mass.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage July 31 1924 (Month) (Day) (Year)

(City or town making return.)

Registered No. 11

Intention No.

GROOM		BRIDE	
3 FULL NAME Roland Wayne Eastman		13 FULL NAME Claire Helen Smith (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 24 (Years)	5 COLOR Wh.	14 AGE AT LAST BIRTHDAY 25 (Years)	15 COLOR Wh
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.		16 RESIDENCE AT TIME OF MARRIAGE Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Florist		19 OCCUPATION Waitress	
10 BIRTHPLACE Manchester N. H. (City or town) (State or country)		20 BIRTHPLACE Charlottetown - Canada (City or town) (State or country)	
11 NAME OF FATHER Charles W Eastman		21 NAME OF FATHER James F Smith	
12 MAIDEN NAME OF MOTHER Nellie Fernald		22 MAIDEN NAME OF MOTHER Catherine McNally	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this eleventh day of July 19

Certificate issued July 31 — (Month) (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Main St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Southboro (Name of city or town) on July (Month) 31. (Day) 1924. (Year)

Name John J. Lockett Official station Clergyman. (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southboro.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town Cambridge (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) Aug (Day) 3 (Year) 1924

(City or town making return)

Registered No. 12

Intention No.

GROOM		BRIDE	
3 FULL NAME Leon Albert Pierce		13 FULL NAME Harriet Mabel Voter (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY 34 (Years)	5 COLOR Wh.	14 AGE AT LAST BIRTHDAY 21 (Years)	15 COLOR Wh
6 RESIDENCE AT TIME OF MARRIAGE South Boro		16 RESIDENCE AT TIME OF MARRIAGE South Boro	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED Sing	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED Sing
9 OCCUPATION RR Baggage Master		19 OCCUPATION At Home	
10 BIRTHPLACE Brookfield (City or town) Mass (State or country)		20 BIRTHPLACE Clinton (City or town) Mass (State or country)	
11 NAME OF FATHER Edward F Pierce		21 NAME OF FATHER George H Voter	
12 MAIDEN NAME OF MOTHER Amelia Bath		22 MAIDEN NAME OF MOTHER Harriet E Reed	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Boro (Name of city or town) according to law, this 25th day of June 1924

Certificate issued June (Month) 30th (Day) (Year) by Chas L Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 19 Cottage St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward Cambridge (Name of city or town) on Aug (Month) 3 (Day) 1924 (Year)

Name Wilbur G. Cliff Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 19, Cottage St., City or town of Cambridge

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Joseph Robert Bayley	13 FULL NAME: Bridie Sheehan (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 24 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 26 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: 5 Conry St Somerville
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Laborer	19 OCCUPATION: Waitress
10 BIRTHPLACE: Southborough Mass (City or town) (State or country)	20 BIRTHPLACE: Ireland (City or town) (State or country)
11 NAME OF FATHER: Thomas N Bayley	21 NAME OF FATHER: Michael Sheehan
12 MAIDEN NAME OF MOTHER: Mary Corrigan	22 MAIDEN NAME OF MOTHER: Margaret Collins

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 15th day of July 1924

Certificate issued July 22 1924 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Joseph's Church (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Somerville (Name of city or town) on Aug (Month) 17 (Day) 1924 (Year)

Name James A Shiney Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 264 Washington St., City or town of Somerville

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 13

Intention No. .....

GROOM	BRIDE
3 FULL NAME Patrick Robert Callahan	13 FULL NAME Mary Frances Salmon (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 27 (Years)	14 AGE AT LAST BIRTHDAY 23 (Years)
5 COLOR White	15 COLOR white
6 RESIDENCE AT TIME OF MARRIAGE Marlboro, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
8 SINGLE, WIDOWED, OR DIVORCED single	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Clerk	19 OCCUPATION Bookkeeper
10 BIRTHPLACE Ware (City or town) Mass. (State or country)	20 BIRTHPLACE Southborough (City or town) Mass. (State or country)
11 NAME OF FATHER John J. Callahan	21 NAME OF FATHER Patrick M. Salmon
12 MAIDEN NAME OF MOTHER Mary McGovern	22 MAIDEN NAME OF MOTHER Delia Noonan

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 28th day of August, 1924

Certificate issued September 6 1924 (Month) (Day) (Year) by Maurice F. McDonald asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on September 8, 1924 (Month) (Day) (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro, Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-1-22. 50,000.

Divorce decree attached
Copy of fin day mains attached

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 14

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Edgar M Smith		13 FULL NAME: Mary E Drake (Collins) (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 74 (Years)	5 COLOR:	14 AGE AT LAST BIRTHDAY: 60 (Years)	15 COLOR:
6 RESIDENCE AT TIME OF MARRIAGE: Southborough		16 RESIDENCE AT TIME OF MARRIAGE: 31 Electric Ave Somerville Mass	
7 NUMBER OF MARRIAGE: Second (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: widowed	17 NUMBER OF MARRIAGE: Second (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED: Divorced
9 OCCUPATION: Farmer		19 OCCUPATION: Housekeeper	
10 BIRTHPLACE: Deerfield (City or town)	Mass (State or country)	20 BIRTHPLACE: Halifax (City or town)	Nova Scotia (State or country)
11 NAME OF FATHER: Levi Smith		21 NAME OF FATHER: John E Collins	
12 MAIDEN NAME OF MOTHER: Larina Rice		22 MAIDEN NAME OF MOTHER: Louisa Publecow	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this Eleventh day of September 1924

Certificate issued September 11th (Month) (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 31 Electric Ave St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward Somerville (Name of city or town) on September 11, 1924 (Month) (Day) (Year)

Name John J. Lockett Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ..... Main St., City or town of Southboro. Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-'22. 50,000.

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DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 15

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Domenic Martino		13 FULL NAME: Marion Mauro (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 24 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 23 (Years)	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: sing G	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: sing G
9 OCCUPATION: Shoe worker		19 OCCUPATION: File Clerk	
10 BIRTHPLACE: Italy (City or town) (State or country)		20 BIRTHPLACE: Southborough Mass (City or town) (State or country)	
11 NAME OF FATHER: Domenic Martin		21 NAME OF FATHER: Pasquale Mauro	
12 MAIDEN NAME OF MOTHER: Donato Consolmagno		22 MAIDEN NAME OF MOTHER: Rachel Gorge	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of South Borough (Name of city or town) according to law, this 16th day of August 1924

Certificate issued August (Month) 21 (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk or ~~Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anne's Church (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Sept 20 (Month) (Day) 1924 (Year)

Name James F. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 17

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Clinn Sherwood Slawson	13 FULL NAME: Vera Maria Swenson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 26 (Years)	5 COLOR: Wh.
14 AGE AT LAST BIRTHDAY: 20 (Years)	15 COLOR: wh
6 RESIDENCE AT TIME OF MARRIAGE: South Borough	16 RESIDENCE AT TIME OF MARRIAGE: Medford Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: Single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Salesman	19 OCCUPATION: Stenographer
10 BIRTHPLACE: First Hill, Mass (City or town) (State or country)	20 BIRTHPLACE: Medford Mass (City or town) (State or country)
11 NAME OF FATHER: Fred G. Slawson	21 NAME OF FATHER: John Alfred Swenson
12 MAIDEN NAME OF MOTHER: Caroline Wolff	22 MAIDEN NAME OF MOTHER: Mathilda Andersen

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of South Borough (Name of city or town) according to law, this 27th day of September 1924

Certificate issued Oct 5 (Month) (Day) 1924 (Year) by Chas. L. Fairbank (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. Grace Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Medford (Name of city or town) on October (Month) 7 (Day) 1924 (Year)

Name Dwight W. Hadley Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 185 High St., City or town of Medford

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 16

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Lawrence Leo Kane	13 FULL NAME: Mary Elizabeth Maley (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 33 (Years)	14 AGE AT LAST BIRTHDAY: 30 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Buffalo New York	16 RESIDENCE AT TIME OF MARRIAGE: Southboro Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Claim Adjuster	19 OCCUPATION: Sales-Lady
10 BIRTHPLACE: Bath (City or town) Maine (State or country)	20 BIRTHPLACE: Southboro (City or town) Mass. (State or country)
11 NAME OF FATHER: John William Kane	21 NAME OF FATHER: Michael R Maley
12 MAIDEN NAME OF MOTHER: Catherine Mac Elroy	22 MAIDEN NAME OF MOTHER: Johanna F. Brenn

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fifteenth day of Sept 1924

Certificate issued September (Month) 23 (Day) 1924 (Year) by Marjorie F. McDonald Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) Southboro on October (Month) 8 (Day) 1924 (Year)

Name James P. Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd St., City or town of Southboro mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. 18

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Joseph B Farley	13 FULL NAME: Gladys Madeline Washburn (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 31 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: Wh.	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: South Borough	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Chauffeur	19 OCCUPATION: Telephone Operator
10 BIRTHPLACE: Worcester (City or town) Mass (State or country)	20 BIRTHPLACE: Pittsfield (City or town) Mass (State or country)
11 NAME OF FATHER: Patrick Farley	21 NAME OF FATHER: Cornelius Washburn
12 MAIDEN NAME OF MOTHER: Katherine Mc Donald	22 MAIDEN NAME OF MOTHER: Virginia Mary Louise Currier

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of South Borough (Name of city or town) according to law, this Eighteenth day of October 1924

Certificate issued October (Month) 28th (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 17 Washington St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Northborough (Name of city or town) on Oct. (Month) 26 (Day) 1924 (Year)

Name Thomas B Lowrey Official station Bapt. Clergyman. (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 17 Washington St., City or town of Northborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

2-22. 50,000.

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

(City or town making return.)

Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: William P Ward		13 FULL NAME: Helen Lenna MacEachern (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 35 (Years)	5 COLOR: Wh.	14 AGE AT LAST BIRTHDAY: 28 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: sing'l	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: sing'l
9 OCCUPATION: Chauffeur		19 OCCUPATION: Nurse	
10 BIRTHPLACE: New York (City or town)	NY (State or country)	20 BIRTHPLACE: Mount Stewart (City or town)	PEI (State or country)
11 NAME OF FATHER: Moses W Ward		21 NAME OF FATHER: Angus MacEachern	
12 MAIDEN NAME OF MOTHER: Rosalie A Buckley		22 MAIDEN NAME OF MOTHER: Hannah Elizabeth McAuley	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this Third day of November 1924.

Certificate issued November (Month) 8 (Day) 1924 (Year) by Chas. L. Fairbanks (City or Town Clerk ~~or Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southboro (Name of city or town) on November (Month) 12 (Day) 1924 (Year)

Name James P Curran Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Southboro St., City or town of Mass

25 Certificate received by city or town clerk Nov. 13. 1924 (Month) (Day) (Year) C. L. Fairbanks CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Earl N Kemp	13 FULL NAME: Edna Blanche Doolittle (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 19 (Years)	14 AGE AT LAST BIRTHDAY: 24 (Years)
5 COLOR: Wh.	15 COLOR: Wh.
6 RESIDENCE AT TIME OF MARRIAGE: Framingham Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Machine Operator	19 OCCUPATION: Mill Operative
10 BIRTHPLACE: Richford Vt (City or town) (State or country)	20 BIRTHPLACE: Southborough Mass (City or town) (State or country)
11 NAME OF FATHER: Earl N Kemp	21 NAME OF FATHER: Emery Doolittle
12 MAIDEN NAME OF MOTHER: Lessie May Cumplin	22 MAIDEN NAME OF MOTHER: Lillie Gleason

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this sixth day of November 1924

Certificate issued November (Month) 11 (Day) 1924 (Year) by Chas. R. Fairbanks (City or Town Clerk or ~~Registrar~~)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 59 Flanders St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Nov (Month) 22 (Day) 1924 (Year)

Name H L Thornton Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 59 Flanders St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

..... (City or town making return.)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Francis Trowbridge Merrifield	13 FULL NAME: Agnes Elivera Wiberg (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	5 COLOR: White
14 AGE AT LAST BIRTHDAY: 23 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: 15 Boyd St, Worcester, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	8 SINGLE, WIDOWED, OR DIVORCED: single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Clerk	19 OCCUPATION: Clerk
10 BIRTHPLACE: Middletown Conn. (City or town) (State or country)	20 BIRTHPLACE: Worcester Mass (City or town) (State or country)
11 NAME OF FATHER: Alfred S. Merrifield	21 NAME OF FATHER: F. O. Wiberg
12 MAIDEN NAME OF MOTHER: Lena McNutt	22 MAIDEN NAME OF MOTHER: Augusta Nelson

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 13th day of November 1924

Certificate issued November (Month) 18 (Day) 1924 (Year) by Marjorie T. McDonald asst (City or Town Clerk ~~or Registrar~~)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 13 Anderson Ave (If marriage was solemnized in a church, give its NAME instead of street and number)

2 Ward Worcester (Name of city or town) on Nov (Month) 27 (Day) 1924 (Year)

Name John A. Eckstrom Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 46 Wachusett St., City or town of Worcester

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return.)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Charles Mauro	13 FULL NAME: Florence Evelyn Gray (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 27 (Years)	14 AGE AT LAST BIRTHDAY: 21 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Carpenter	19 OCCUPATION: Bookkeeper
10 BIRTHPLACE: Southborough (City or town) Mass (State or country)	20 BIRTHPLACE: Everet (City or town) Mass (State or country)
11 NAME OF FATHER: Pasquale Mauro	21 NAME OF FATHER: John Grant Gray
12 MAIDEN NAME OF MOTHER: Rachel Daga	22 MAIDEN NAME OF MOTHER: Ida Florence Currier

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this fifth day of March 19 25

Certificate issued March (Month) 11 (Day) 1925 (Year) by Marion T. McDonald (City or Town Clerk or Registrar) asst

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 76 South St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Bridgewater (Name of city or town) on March (Month) 18 (Day) 1925 (Year)

Name Isaac Parker Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 76 South St., City or town of Bridgewater

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

R-103

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. This form is for the use of the person officiating when the parties to the marriage are not residents of the city or town in which the marriage is solemnized, and is to be filled out, properly attested and returned, to the registrar or clerk of the city or town in which the marriage took place, on or before the tenth day of the month next following. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS.

J.-'20. 10,000.

The Commonwealth of Massachusetts

COPY OF CERTIFICATE OF INTENTION OF MARRIAGE

(See instructions on margin)

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

1 PLACE OF MARRIAGE City or town Southborough, Mass. Registered No.

2 DATE OF MARRIAGE March 29, 1925 (Month) (Day) (Year) Return of city or town of Southborough.

GROOM	BRIDE
3 FULL NAME Charles Hiram Proctor	13 FULL NAME Sabina Annis Wilson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 29 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 30 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Fitchburg	16 RESIDENCE AT TIME OF MARRIAGE Fitchburg
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	8 ~~SINGLE, WIDOWED, OR DIVORCED~~
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	18 ~~SINGLE, WIDOWED, OR DIVORCED~~
9 OCCUPATION Teller	19 OCCUPATION Nurse
10 BIRTHPLACE Lunenburg (City or town), Mass. (State or country)	20 BIRTHPLACE Byfield (Byfield), Mass. (City or town) (State or country)
11 NAME OF FATHER Charles Everett Proctor	21 NAME OF FATHER Hugh Wilson
12 MAIDEN NAME OF MOTHER Carrie Lucilla Barney	22 MAIDEN NAME OF MOTHER Katherine Mullen

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the city (~~or town~~) of Fitchburg according to law, this 11th day of March 1925

Certificate issued March 18, 1925 by Herbert G. Morse city clerk ~~REGISTRAR~~

24 To the Town (City or town) Clerk of Southborough

I HEREBY CERTIFY that the foregoing is a true copy of the Certificate of Intention of Marriage issued March 11, 1925 (Month) (Day) (Year)

by Herbert G. Morse (Name of clerk) Clerk of the city (or town) of Fitchburg Massachusetts, and

that the persons named therein were joined in marriage by me, at ~~No.~~ St. Mark's Church ~~St.~~, (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward in the ~~city (or~~ town) of Southborough on March 29th 1925.

Name Robert F. Cheney Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St. Mark's Rectory St., City or town of Southborough, Mass.

25 Received by city or town clerk 19

REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Henry Berry	13 FULL NAME: Margaret Patterson (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 49 (Years)	14 AGE AT LAST BIRTHDAY: 40 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: widowed	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Laborer	19 OCCUPATION: Housekeeper
10 BIRTHPLACE: London, England (City or town) (State or country)	20 BIRTHPLACE: Sydney, Nova Scotia (City or town) (State or country)
11 NAME OF FATHER: Edward Berry	21 NAME OF FATHER: Donald Patterson
12 MAIDEN NAME OF MOTHER: Margaret Ames	22 MAIDEN NAME OF MOTHER: Christine McKenzie

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 8th day of April 1925

Certificate issued April (Month) 13 (Day) 1925 (Year) by C. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 8 Harlow St (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Dorchester (Name of city or town) on April (Month) 14 (Day) 1925 (Year)

Name Donald MacKenzie Official station Min. of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 104 Brook Rd St., City or town of Milton Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

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2-22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or Town making return.)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Reginald W Hadley	13 FULL NAME: Mary Elizabeth Whelan (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 34 (Years)	14 AGE AT LAST BIRTHDAY: 29 (Years)
5 COLOR: White	15 COLOR: Whit.
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Westborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Forestry	19 OCCUPATION: Weaver
10 BIRTHPLACE: Boston (City or town) Mass (State or country)	20 BIRTHPLACE: Westborough (City or town) Mass (State or country)
11 NAME OF FATHER: Osgood Hadley	21 NAME OF FATHER: Michael Whelan
12 MAIDEN NAME OF MOTHER: Josephine Scanlon	22 MAIDEN NAME OF MOTHER: Sarah E. Kane

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this sixth day of April 19 25

Certificate issued April (Month) 12 (Day) 1925 (Year) by Mayme F. McDonald asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Luke's Church (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Westboro (Name of city or town) on April (Month) 14 (Day) 1925 (Year)

Name John F. Boland Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 70 W. Main St., City or town of Westboro.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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(City or town making return.)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Frank Kenneth Beals.		13 FULL NAME: Olive Edith Baulos. (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 18 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough.		16 RESIDENCE AT TIME OF MARRIAGE: Southborough.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Post office Clerk.		19 OCCUPATION: Housework.	
10 BIRTHPLACE: Keene (City or town) N. H. (State or country)		20 BIRTHPLACE: Nova Scotia (City or town) (State or country)	
11 NAME OF FATHER: B Hardy Beals.		21 NAME OF FATHER: Wilfred Archibald Baulos	
12 MAIDEN NAME OF MOTHER: Edith Beals		22 MAIDEN NAME OF MOTHER: Emma Prime	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this ninth day of March 19 25

Certificate issued March (Month) 20 (Day) 1925 (Year) by Marjorie F. McDonald asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Hunnewell Road St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on April (Month) 15 (Day) 1925 (Year)

Name Frank K. Neary Official station Minister (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Lieutenant Hall St., City or town of Newton Centre Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-22, 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return.)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Mauro C. Villano		13 FULL NAME: Mary Guarnieri (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 23 (Years)	5 COLOR: White	14 AGE AT LAST BIRTHDAY: 21 (Years)	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Marlboro Mass.		16 RESIDENCE AT TIME OF MARRIAGE: Southboro, Mass	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 1st	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Shoe worker		19 OCCUPATION: Shoe worker	
10 BIRTHPLACE: (City or town)	Italy (State or country)	20 BIRTHPLACE: (City or town)	Italy (State or country)
11 NAME OF FATHER: Joseph Villano		21 NAME OF FATHER: Tony Guarnieri	
12 MAIDEN NAME OF MOTHER: Angelina Nicola		22 MAIDEN NAME OF MOTHER: Modesta Sarilli	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southboro (Name of city or town) according to law, this 12th day of March 1926

Certificate issued March (Month) 19 (Day) 1926 (Year) by Maurice T. McDonald Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southboro (Name of city or town) on April (Month) 18 (Day) 26 (Year)

Name Francis J. Maurice, Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St Anns Rectory St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year)

CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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2-22. 1-22. 60,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town: Southborough (Do not enter name of village or section of city or town)

2 Date of Marriage: April (Month) 19th (Day) 1925 (Year)

(City or town making return.)

Registered No.

Intention No.

GROOM	BRIDE
3 FULL NAME: Robert James Metcalf	13 FULL NAME: Alla Evelyn Tucker (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 35 (Years)	14 AGE AT LAST BIRTHDAY: 23 (Years)
5 COLOR: Wh.	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Waterbury Conn	16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.
7 NUMBER OF MARRIAGE: Second (1st, 2d, 3d, etc.)	17 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)
8 SINGLE, WIDOWED, OR DIVORCED: Widowed	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Barber	19 OCCUPATION: Housework
10 BIRTHPLACE: Ireland (City or town) (State or country)	20 BIRTHPLACE: Saybrook - Conn (City or town) (State or country)
11 NAME OF FATHER: Hamilton Metcalf	21 NAME OF FATHER: William Tucker
12 MAIDEN NAME OF MOTHER: Sarah Hayden	22 MAIDEN NAME OF MOTHER: Lila M Wallace

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this Thirteenth day of April 1925

Certificate issued April 18 1925 (Month) (Day) (Year) by Chas R. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. Pearl St. (If marriage was solemnized in a church, give its NAME instead of street and number) St., 2 Ward Southborough (Name of city or town) on April (Month) 19th (Day) 1925 (Year)

Name Norman M. Guy Official station Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 35 Everett Ave St., City or town of Watertown.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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(City or town making return)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME	John Francis Cogan	13 FULL NAME (If a widow or divorced, give also maiden name)	Mary Cecilia Halligan
4 AGE AT LAST BIRTHDAY 36 (Years)	5 COLOR White	14 AGE AT LAST BIRTHDAY 31 (Years)	15 COLOR white
6 RESIDENCE AT TIME OF MARRIAGE	1654 Columbia Road South Boston, Mass.	16 RESIDENCE AT TIME OF MARRIAGE	Southborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION	manufacturing + importing	19 OCCUPATION	Secretary
10 BIRTHPLACE (City or town) Boston (State or country) Mass.		20 BIRTHPLACE (City or town) Boston (State or country) Mass.	
11 NAME OF FATHER	John Cogan	21 NAME OF FATHER	Michael Halligan
12 MAIDEN NAME OF MOTHER	Catherine Driman	22 MAIDEN NAME OF MOTHER	Margaret Bartley

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 18th day of April 1925

Certificate issued April (Month) 24 (Day) 1925 (Year) by Marion F. McDonald asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St Anns St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) Southboro on Apr. (Month) 25 (Day) 25 (Year)

Name Francis J. Maxwell Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. St Anns Rectory St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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1 PLACE OF MARRIAGE — City or Town ____ (Do not enter name of village or section of city or town)

(City or town making return) ✓

2 Date of Marriage ____ (Month) (Day) (Year) — Registered No. ____ Intention No. ____

GROOM	BRIDE
3 FULL NAME: Mark Ellsworth Fernald	13 FULL NAME: Sophia Ellen (Wilkie) Silver (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 53 (Years)	5 COLOR: white
14 AGE AT LAST BIRTHDAY: 38 (Years)	15 COLOR: white
6 RESIDENCE AT TIME OF MARRIAGE: Southborough.	16 RESIDENCE AT TIME OF MARRIAGE: Worcester, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd	8 SINGLE, WIDOWED, OR DIVORCED: widowed.
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): 2nd	18 SINGLE, WIDOWED, OR DIVORCED: widow
9 OCCUPATION: Superintendent	19 OCCUPATION: Educational assistant
10 BIRTHPLACE: Corinth (City or town), Maine (State or country)	20 BIRTHPLACE: London (City or town), England (State or country)
11 NAME OF FATHER: George T. Fernald.	21 NAME OF FATHER: George F. Wilkie
12 MAIDEN NAME OF MOTHER: Sarah F. Berry	22 MAIDEN NAME OF MOTHER: Ellen A. Moren

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 19th day of April 1925

Certificate issued April (Month) 25 (Day) 1925 (Year) by Marjorie F. McDonald asst (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 13 Woodland St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ____ (Name of city or town) on April (Month) 29 (Day) 1925 (Year)

Name Charles Lancaster Short Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 21 Dayton St., City or town of Worcester

25 Certificate received by city or town clerk ____ (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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(City or town making return) ✓

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: Joseph Mauro	13 FULL NAME: Ursula Pessoland (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 25 (Years)	5 COLOR: Wh
	14 AGE AT LAST BIRTHDAY: 17 (Years) (Guardian's consent on file)
	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Southborough	16 RESIDENCE AT TIME OF MARRIAGE: Marlborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single
	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Farmer	19 OCCUPATION: At home
10 BIRTHPLACE: Southborough (City or town) (State or country)	20 BIRTHPLACE: Marlborough (City or town) (State or country)
11 NAME OF FATHER: Pasquale Mauro	21 NAME OF FATHER: Vincenzo Pessoleno
12 MAIDEN NAME OF MOTHER: Rachel Sorga	22 MAIDEN NAME OF MOTHER: Luisa Pellegrino

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 6th day of May 1925

Certificate issued May 18 1925 (Month) (Day) (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Ann's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... (Name of city or town) on 31 (Month) May (Day), 1920 (Year)

Name Rev. Daniel Schiavone Official station Roman Catholic Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 62 Gibbon St. St., City or town of Marlboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

(City or town making return) ✓

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME William Leo Dalton	13 FULL NAME Alice Corbett (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 24 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 20 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Marlborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Printer	19 OCCUPATION Shoe worker
10 BIRTHPLACE Marlborough Mass (City or town) (State or country)	20 BIRTHPLACE Southborough Mass (City or town) (State or country)
11 NAME OF FATHER Richard Dalton	21 NAME OF FATHER Charles E Corbett
12 MAIDEN NAME OF MOTHER Catherine Manning	22 MAIDEN NAME OF MOTHER Marion A. Barnes

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 20th day of June 1925

Certificate issued June (Month) 26 (Day) 1925 (Year) by Margaret F. McDonald Asst (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. 17 Washington St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Marlboro (Name of city or town) on June (Month) 27th (Day) 1925 (Year)

Name Francis R Lowney Official station Cath. Clergyman (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ....., St., City or town of 17 Washington St

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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(City or town making return)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Clinton DeWitt Park	13 FULL NAME Annie Stanton Marston (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 39 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 35 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Watertown, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) Second	8 SINGLE, WIDOWED OR DIVORCED Divorced (Copy of Decree on file)
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) First	18 SINGLE, WIDOWED, OR DIVORCED Single
9 OCCUPATION Teacher	19 OCCUPATION Teacher
10 BIRTHPLACE Presque Isle (City or town) Maine (State or country)	20 BIRTHPLACE Center Sandwich (City or town) N. H. (State or country)
11 NAME OF FATHER George M. Park	21 NAME OF FATHER James L. Marston
12 MAIDEN NAME OF MOTHER Frances C. DeWitt	22 MAIDEN NAME OF MOTHER Grace Stanton

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 13th day of June 1925

Certificate issued June (Month) 19 (Day) 1925 (Year) by Maxine F. McDonald Asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 12 Parker St., (If marriage was solemnized in a church, give its NAME instead of street and number) Ward ..... Watertown (Name of city or town) on June (Month) 27 (Day) 1925 (Year)

Name Edward C. Cornish Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 215 Mt. Auburn St., City or town of Watertown, Mass

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year)

Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: Donald R Blood		13 FULL NAME: Ethel May Lincoln (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 26 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 21 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Farmer		19 OCCUPATION: Clerk	
10 BIRTHPLACE: Belfast (City or town) Maine (State or country)		20 BIRTHPLACE: Southborough (City or town) Mass. (State or country)	
11 NAME OF FATHER: Rafe K Blood		21 NAME OF FATHER: Harry R Lincoln	
12 MAIDEN NAME OF MOTHER: Lucy Webb		22 MAIDEN NAME OF MOTHER: Grace Hawkins	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town)

of Southborough (Name of city or town) according to law, this 24th day of June 1925

Certificate issued June (Month) 24 (Day) 1925 (Year) by Chas. L. Fairbank (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No Bridge Lane - Turnpike Rd. St. (If marriage was solemnized in a church, give its NAME instead of street and number)

✓ Ward ..... Southborough (Name of city or town) on June (Month) 30 (Day) 1925 (Year)

Name Robert F. Cheney Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ✓ Main St., City or town of Southborough, Mass.

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

FORM R-101

MARGIN RESERVED FOR BINDING

N. B.—WRITE PLAINLY, WITH UNFADING BLACK INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. ALTERATIONS AND ERASURES IN THIS CERTIFICATE ARE FORBIDDEN; PENALTY FOR VIOLATION, ONE HUNDRED DOLLARS. See reverse side for extracts from the laws relating to the RETURN OF MARRIAGES.

2-'22. 50,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

(City or town making return)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME: John Howard Miller	13 FULL NAME: Charlotte Evelyn Robbins (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY: 21 (Years)	14 AGE AT LAST BIRTHDAY: 20 (Years)
5 COLOR: White	15 COLOR: White
6 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass	16 RESIDENCE AT TIME OF MARRIAGE: Southborough, Mass
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first
8 SINGLE, WIDOWED, OR DIVORCED: single	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Mechanic	19 OCCUPATION: Stenographer
10 BIRTHPLACE: Southborough, Mass (City or town) (State or country)	20 BIRTHPLACE: Langus, Mass (City or town) (State or country)
11 NAME OF FATHER: George W. Miller	21 NAME OF FATHER: James William Robbins
12 MAIDEN NAME OF MOTHER: Bertha Smith	22 MAIDEN NAME OF MOTHER: Bertha Parker

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 22nd day of June 1925

Certificate issued July (Month) 2 (Day) 1925 (Year) by Mayme F. McDonald asst (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... Southborough (Name of city or town) on July (Month) 5 (Day) 1925 (Year)

Name William A. Knight Official station Minister of the gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 9, Vernon St., City or town of Framingham

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

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(City or town making return)

1 PLACE OF MARRIAGE

City or Town (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year)

Registered No.

Intention No.

GROOM		BRIDE	
3 FULL NAME	Aldo Cibelli	13 FULL NAME (If a widow or divorced, give also maiden name)	Eunice Fay
4 AGE AT LAST BIRTHDAY (Years)	30	14 AGE AT LAST BIRTHDAY (Years)	15
5 COLOR	White	15 COLOR	White
6 RESIDENCE AT TIME OF MARRIAGE	Southborough	16 RESIDENCE AT TIME OF MARRIAGE	Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.)	first
8 SINGLE, WIDOWED, OR DIVORCED	single	18 SINGLE, WIDOWED, OR DIVORCED	single
9 OCCUPATION	Mason	19 OCCUPATION	At home
10 BIRTHPLACE (City or town)	Pasaro (State or country) Italy	20 BIRTHPLACE (City or town)	Italy (State or country)
11 NAME OF FATHER	Primo Cibelli	21 NAME OF FATHER	Domenic Fay
12 MAIDEN NAME OF MOTHER	Anna Giorgi	22 MAIDEN NAME OF MOTHER	Lena Palazzi

Entered by Henry H. Atwood Judge of Probate Court

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the town (City or town) of Southborough (Name of city or town) according to law, this 26th day of July 1925

Certificate issued August (Month) 3 (Day) 1925 (Year) by Chas. L. Fairbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Anne's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward (Name of city or town) Southboro on Aug. (Month) 10. (Day) 25 (Year)

Name Francis J. Maxwell Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Road St., City or town of Southboro

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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10-20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE — City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM		BRIDE	
3 FULL NAME: George Thompson Taylor		13 FULL NAME: Mildred Mary Turnbull (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 29 (Years)	5 COLOR: Wh	14 AGE AT LAST BIRTHDAY: 31 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: Tampa - Florida		16 RESIDENCE AT TIME OF MARRIAGE: Southborough Mass.	
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	8 SINGLE, WIDOWED, OR DIVORCED: single	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.): first	18 SINGLE, WIDOWED, OR DIVORCED: single
9 OCCUPATION: Contractor		19 OCCUPATION: Dressmaker	
10 BIRTHPLACE: Scotland (City or town) (State or country)		20 BIRTHPLACE: England (City or town) (State or country)	
11 NAME OF FATHER: John Taylor		21 NAME OF FATHER: Thomas Turnbull	
12 MAIDEN NAME OF MOTHER: Jane Thompson		22 MAIDEN NAME OF MOTHER: Sarah Bell	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 9th day of September 1925

Certificate issued September 12 1925 (Month) (Day) (Year) by Chas. F. Eastbanks (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. St. Mark's Church St., (If marriage was solemnized in a church, give its NAME instead of street and number) — Ward ..... Southborough (Name of city or town) on Sept. 12, 1925 (Month) (Day) (Year)

Name Robert F. Cheney Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St., City or town of Southborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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10-'20. 20,000.

OFFICE OF THE SECRETARY
DIVISION OF VITAL STATISTICS

The Commonwealth of Massachusetts

CERTIFICATE OF MARRIAGE

This certificate must be delivered to the person before whom the marriage is to be contracted before he proceeds to solemnize the same.

1 PLACE OF MARRIAGE ✓ (City or Town)

City or Town (Do not enter name of village or section of city or town)

2 Date of Marriage (Month) (Day) (Year) Registered No.

Intention No.

GROOM	BRIDE
3 FULL NAME Glenda Wright Knapp	13 FULL NAME Annie Florence Grant (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 31 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 24 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Cambridge, Mass.
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	8 SINGLE, WIDOWED, OR DIVORCED single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) first	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Test Coast man	19 OCCUPATION Housewife
10 BIRTHPLACE Dalton (City or town) Mass. (State or country)	20 BIRTHPLACE Lynn (City or town) Mass. (State or country)
11 NAME OF FATHER James Madison Knapp	21 NAME OF FATHER Frank William Grant
12 MAIDEN NAME OF MOTHER Nettie Wright	22 MAIDEN NAME OF MOTHER Mary Cypress Town

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the (City or town) of Southborough (Name of city or town) according to law, this seventh day of September 1925

Certificate issued September 12-1925 (Month) (Day) (Year) by Chas. L. Fitzgerald (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. 114 Newton St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward 1 Marlboro (Name of city or town) on Sept. 17 1925 (Month) (Day) (Year)

Name S. James Cann Official station Minister of the Gospel (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. 114 Newton St., City or town of Marlboro, Mass.

25 Certificate received by city or town clerk (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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2-'22. 50,000.

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The Commonwealth of Massachusetts

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(City or town making return) ✓

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM	BRIDE
3 FULL NAME Peter Mario Aspesi	13 FULL NAME Rose Felicia Bianchi (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 26 (Years)	5 COLOR White
14 AGE AT LAST BIRTHDAY 19 (Years)	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Southborough	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED single
17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Laborer	19 OCCUPATION Operative
10 BIRTHPLACE Italy (City or town) (State or country)	20 BIRTHPLACE Southborough (City or town) (State or country)
11 NAME OF FATHER Carlo Aspesi	21 NAME OF FATHER Peter Bianchi
12 MAIDEN NAME OF MOTHER Theresa Colombo	22 MAIDEN NAME OF MOTHER Marie Bina

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 31st day of August 1925

Certificate issued September 5, 1925 (Month) (Day) (Year) by Margaret F. McDonald asst. (City or Town Clerk or Registrar)

24 **I HEREBY CERTIFY** that I joined the above-named persons in marriage at No. St. Anne's St., (If marriage was solemnized in a church, give its NAME instead of street and number)

Ward ..... (Name of city or town) on Sept. 21, 25 (Month) (Day) (Year)

Name Francis J. Mankell Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Boston Rd. St., City or town of Southboro

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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10-20. 20,000.

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CERTIFICATE OF MARRIAGE

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1 PLACE OF MARRIAGE City or Town ..... (Do not enter name of village or section of city or town) ..... (City or Town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. ..... Intention No. .....

GROOM	BRIDE
3 FULL NAME Frederick Raymond Wilson	13 FULL NAME Cornelia Brown Kelley (If a widow or divorced, give also maiden name)
4 AGE AT LAST BIRTHDAY 21 (Years)	5 COLOR White
	14 AGE AT LAST BIRTHDAY 21 (Years)
	15 COLOR White
6 RESIDENCE AT TIME OF MARRIAGE Marlborough, Mass.	16 RESIDENCE AT TIME OF MARRIAGE Southborough
7 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st	8 SINGLE, WIDOWED, OR DIVORCED single
	17 NUMBER OF MARRIAGE (1st, 2d, 3d, etc.) 1st
	18 SINGLE, WIDOWED, OR DIVORCED single
9 OCCUPATION Factory Worker	19 OCCUPATION Operator
10 BIRTHPLACE Marlborough Mass (City or town) (State or country)	20 BIRTHPLACE Boston, Mass. (City or town) (State or country)
11 NAME OF FATHER Samuel Fred Wilson	21 NAME OF FATHER Hugh Kelley
12 MAIDEN NAME OF MOTHER Jessie Finley	22 MAIDEN NAME OF MOTHER Agnes M. Forbes

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of Southborough (Name of city or town) according to law, this 16th day of September, 1925

Certificate issued Sept. 22 - 1925 (Month) (Day) (Year) by Margaret F. McDonald Asst. (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at St. Mark's Church (If marriage was solemnized in a church, give its NAME instead of street and number)

✓ Ward ..... (Name of city or town) Southborough on September 26, 1925. (Month) (Day) (Year)

Name Robert Francis Cheney Official station Priest (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. Main St. St., City or town of Southborough

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR

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CERTIFICATE OF MARRIAGE

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(City or town making return.)

1 PLACE OF MARRIAGE

City or Town ..... (Do not enter name of village or section of city or town)

2 Date of Marriage ..... (Month) (Day) (Year) Registered No. .....

Intention No. .....

GROOM		BRIDE	
3 FULL NAME: William P Ward		13 FULL NAME: Helen Leona MacEachern (If a widow or divorced, give also maiden name)	
4 AGE AT LAST BIRTHDAY: 35 (Years)	5 COLOR: Wh.	14 AGE AT LAST BIRTHDAY: 28 (Years)	15 COLOR: Wh
6 RESIDENCE AT TIME OF MARRIAGE: South Boston Mass		16 RESIDENCE AT TIME OF MARRIAGE: South Boston Mass	
7 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)	8 SINGLE, WIDOWED, OR DIVORCED: Single	17 NUMBER OF MARRIAGE: first (1st, 2d, 3d, etc.)	18 SINGLE, WIDOWED, OR DIVORCED: Single
9 OCCUPATION: Chauffeur.		19 OCCUPATION: Nurse	
10 BIRTHPLACE: New York (City or town)	NY (State or country)	20 BIRTHPLACE: Mount Stewart (City or town)	PEI (State or country)
11 NAME OF FATHER: Moses W Ward		21 NAME OF FATHER: Angus MacEachern	
12 MAIDEN NAME OF MOTHER: Rosalie A Beckley		22 MAIDEN NAME OF MOTHER: Hannah Elizabeth McAuley	

23 THE INTENTION OF MARRIAGE by the above-named persons was duly entered by me in the records of the Town (City or town) of S (Name of city or town) according to law, this 3 day of ..... 19.....

Certificate issued ..... (Month) (Day) (Year) by ..... (City or Town Clerk or Registrar)

24 I HEREBY CERTIFY that I joined the above-named persons in marriage at No. ..... St., (If marriage was solemnized in a church, give its NAME instead of street and number)

..... Ward ..... (Name of city or town) on ..... (Month) (Day) (Year)

Name ..... Official station ..... (Minister of the Gospel, Clergyman, Priest, Rabbi, or Justice of the Peace)

Residence No. ....., St., City or town of .....

25 Certificate received by city or town clerk ..... (Month) (Day) (Year) CITY OR TOWN CLERK OR REGISTRAR